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| Fill in this information to identify your case:                                 |  |
|---|--|
| United States Bankruptcy Court for the:  Northern District of: Illinois (State) |  |
| Case number (if known)  | Chapter you are filing under:              |
|   | Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself  |                            |   |
|----|---|----------------------------|---|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name  | Shakasha                   |   |
|    | Write the name that is on   | First name                 | First name                                    |
|    | your government-issued picture identification (for example, your driver's | Middle name<br>Orr         | Middle name                                   |
|    | license or passport   | Last name                  | Last name                                     |
|    | Bring your picture identification to your meeting with the trustee.       | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |                            |   |
|    | have used in the last<br>8 years  | First name                 | First name                                    |
|    | Include your married or   | Middle name                | Middle name                                   |
|    | maiden names.   | Last name                  | Last name                                     |
|    |   | First name                 | First name                                    |
|    |   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
| 3. | Only the last 4 digits of your Social                                     | XXX - XX- 6059             | xxx - xx-                                     |
|    | Security number or federal Individual                                     | OR                         | OR  |
|    | Taxpayer<br>Identification number<br>(ITIN)                               | 9 xx - xx-                 | 9 xx - xx-                                    |

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| D  | ebtor 1 Shakasha<br>First Name                         | Orr Middle Name Last Name   | Case number (if known)   |
|----|--|---|--|
|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. | Any business names and Employer                        | I have not used any business names or EINs.   | I have not used any business names or EINs.  |
|    | Identification Numbers (EIN) you have used in the last | Business name   | Business name  |
|    | 8 years  | Business name   | Business name  |
|    | Include trade names and doing business as names        | EIN   | EIN  |
|    |  | EIN   | EIN  |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:  |
|    |  | 9756 S Wallace St<br>Number Street  | Number Street  |
|    |  | Chicago Illinois 60628  |  |
|    |  | City State Zip Code   | City State Zip Code  |
|    |  | Cook<br>County  | County   |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number Street   | Number Street  |
|    |  |   |  |
|    |  | City State Zip Code   | City State Zip Code  |
| 6. | Why you are choosing this district                     | Check one:  | Check one:   |
|    | to file for bankruptcy                                 | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|    |  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.   | .) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)  |
|    |  |   | -  |
|    |  |   | _  |
|    |  |   | _  |
|    |  |   |  |
|    |  |   |  |

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| Debtor 1 Shakasha   |   | Orr  |  | Case number (if kno  | own)   |  |
|---|---|--|--|--|--|--|
| First Name  | Middle Nam  | ne Last Name   |  |  |  |  |
| Part 2: Tell the Court Abo  | out Your Bankrup  | tcy Case   |  |  |  |  |
| <ol> <li>The chapter of the<br/>Bankruptcy Code you<br/>are choosing to file<br/>under</li> </ol>   |   | a brief description of each, see<br>a B2010)). Also, go to the top o   |  |  |  | ndividuals Filing for  |
| 8. How you will pay the fee   | more details a cashier's che may pay with  I need to pay Individuals to I request that judge may, but the official poyou choose t | e entire fee when I file my about how you may pay. Ty about how you may pay. Ty ack, or money order If you a credit card or check with the fee in installments. If a Pay Your Filing Fee in Install the my fee be waived (You rut is not required to, waive overty line that applies to you his option, you must fill out and file it with your petition | ypically, if your attorney is a pre-printer from the stallments (Commay request a your fee, an our family signs the Application. | ou are paying the<br>submitting you<br>ed address.<br>This option, sign<br>official Form 103<br>this option only<br>d may do so on<br>ze and you are u | e fee yourself, r payment on your and attach to A).  If you are filingly if your incorunable to pay to the control of the cont | you may pay with cash, your behalf, your attorney the Application for ag for Chapter 7. By law, a me is less than 150% of the fee in installments). If |
| 9. Have you filed for bankruptcy within the last 8 years?   | No.  ✓ Yes. District  District  | Northern District of Illinois  Northern District of Illinois   | When<br>When<br>When   | MM / DD / YYYY 11/16/2015 MM / DD / YYYY   | Case number  Case number  Case number  | 10-40315<br>15-38939   |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Yes. Debtor District Debtor District  |  | When<br>When   | MM / DD / YYYY   | Relationship to Case number, Relationship to Case number,  | you  |
| 11. Do you rent your residence?   | ✓ No.   | e 12.  r landlord obtained an evictio  Go to line 12.  Fill out <i>Initial Statement About</i> this bankruptcy petition.   |  |  |  |  |

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Orr Debtor 1 Shakasha \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Shakasha Orr Case number (if known)
First Name Middle Name Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Orr Debtor 1 Shakasha Case number (if known) Middle Name Last Name First Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Shakasha Orr Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 3/2/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Shakasha                                |                            | Orr                    | Case number (i           | f known)   |
|--|----------------------------|------------------------|--------------------------|--|
| First Name                                       | Middle Name                | Last Name              |                          |  |
| For your attorney, if you are represented by one | eligibility to proceed und | er Chapter 7, 11, 12,  | or 13 of title 11, Unite | have informed the debtor(s) about<br>ed States Code, and have explained the<br>also certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requi | red by 11 U.S.C. § 34  | 42(b) and, in a case in  | which § 707(b)(4)(D) applies, certify that I   |
| represented by an                                | have no knowledge after    | an inquiry that the in | formation in the sched   | dules filed with the petition is incorrect.  |
| attorney, you do not                             |                            |                        |                          | ·  |
| need to file this page.                          | /s/ Corey Walters          |                        | Date                     | 3/2/2017   |
|  | Signature of Attorney for  | or Debtor              |                          | MM / DD / YYYY   |
|  | ,                          |                        |                          |  |
|  |                            |                        |                          |  |
|  | Corey Walters              |                        |                          |  |
|  | Printed name               |                        |                          |  |
|  | Semrad Law Firm            |                        |                          |  |
|  | Firm name                  |                        |                          |  |
|  | 20 S. Clark Street         |                        |                          |  |
|  | Street                     |                        |                          |  |
|  | 28th Floor                 |                        |                          |  |
|  |                            |                        |                          |  |
|  | Chicago                    |                        | Illinois                 | 60603  |
|  | City                       |                        | State                    | Zip Code   |
|  |                            |                        |                          |  |
|  | Contact phone              |                        | Email address            | cwalters@semradlaw.com   |
|  |                            |                        |                          |  |
|  |                            |                        | Illinoi                  | S  |
|  | Bar number                 |                        | State                    |  |

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| Fill in this infor        | mation to identify your ca | ase:        |                      |   |
|---------------------------|----------------------------|-------------|----------------------|---|
| Debtor 1                  | Shakasha                   |             | Orr                  |   |
|                           | First Name                 | Middle Name | Last Name            | _ |
| Debtor 2                  |                            |             |                      |   |
| (Spouse, if filing)       | First Name                 | Middle Name | Last Name            |   |
| United States E           | Bankruptcy Court for the:  | Northern    | District of Illinois | _ |
| Case number<br>(If known) |                            |             | (State)              | _ |

| Check if this is an |
|---------------------|
| amended filing      |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets   |   |
|---|---|
|   | <b>Your assets</b><br>Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$0.00                                      |
| 1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>   | \$4,640.00                                  |
| 1c. Copy line 63, Total of all property on Schedule A/B   | \$4,640.00                                  |
| Part 2: Summarize Your Liabilities  |   |
|   | <b>Your liabilities</b><br>Amount you owe   |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$6,277.00                                  |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$0.00                                      |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>  | \$50,309.00                                 |
| Your total liabilities  | \$56,586.00                                 |
| Part 3: Summarize Your Income and Expenses  |   |
| 1. Schedule I: Your Income (Official Form 106I)   | \$1,806.63                                  |
| Copy your combined monthly income from line 12 of Schedula I  | -   |
| Copy your combined monthly income from line 12 of <i>Schedule I</i>   | \$1,631.00                                  |

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| Deb         | tor 1 | Shakasha   |                         | Orr                             | Case number (if known)                          |            |
|-------------|-------|--|-------------------------|---------------------------------|---|------------|
|             |       | First Name   | Middle Name             | Last Name                       |   |            |
| Part        | 4:    | Answer These Question                                    | s for Administrativ     | ve and Statistical Rec          | cords   |            |
| 6. <b>A</b> | re yo | ou filing for bankruptcy unde                            | er Chapters 7, 11, or   | 13?                             |   |            |
| Г           | ΠΝ    | lo. You have nothing to report                           | on this part of the for | m. Check this box and sub       | omit this form to the court with your other sch | edules.    |
|             |       | es.  |                         |                                 | ,   |            |
| Ľ           | ✓l Y  |  |                         |                                 |   |            |
| 7. <b>W</b> | /hat  | kind of debt do you have?                                |                         |                                 |   |            |
| Ī           |       |  |                         |                                 | d by an individual primarily for a personal,    |            |
|             | fa    | amily, or household purpose. 1                           | 11 U.S.C. § 101(8). Fil | Il out lines 8-10 for statistic | cal purposes. 28 U.S.C. § 159.                  |            |
|             |       | our debts are not primarily on the court with your       |                         | u have nothing to report on     | this part of the form. Check this box and sul   | omit       |
|             | _     |  |                         |                                 |   |            |
|             |       | the Statement of Your Curi<br>122A-1 Line 11; OR, Form 1 |                         |                                 | nonthly income from Official                    | \$2,364.55 |
| 9.          | Con   | by the following special cate                            | gories of claims fron   | m Part 4. line 6 of Schedu      | ıle E/F:  |            |
|             | •     |  | •                       | ,                               |   |            |
|             | Fro   | m Part 4 on Schedule E/F, c                              | opy the following:      |                                 | Total claim                                     |            |
|             | 9a    | Domestic support obligations                             | (Copy line 6a )         |                                 | \$0.00  |            |
|             |       |  |                         |                                 | \$0.00  |            |
|             | 9b.   | Taxes and certain other debts                            | you owe the governm     | nent. (Copy line 6b.)           | <del></del>                                     |            |
|             | 9c.   | Claims for death or personal in                          | njury while you were in | toxicated. (Copy line 6c.)      | \$0.00  |            |
|             | 9d.   | Student loans. (Copy line 6f.)                           |                         |                                 | \$23,998.00                                     |            |
|             | 90    | Obligations arising out of a se                          | naration agreement or   | divorce that you did not re     | sport as \$0.00                                 |            |
|             |       | rity claims. (Copy line 6g.)                             | paradon agrocinisht of  | anoise that you and not le      |   |            |
|             | Of I  | Dabta ta nanajan ay nyefit ah a                          | ing plane and attent    | similar dabta (Capy lizz - Ch   | \$0.00  |            |
|             | 9ī. l | Debts to pension or profit-shar                          | ring plans, and other s | similar debts. (Copy line 6h.   |   |            |

\$23,998.00

9g. Total. Add lines 9a through 9f.

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| Fill in this                           | information to iden  | tify your case:  |   |   |  |
|--|--|--|---|---|--|
| Debtor 1                               | Chalracha  |  | 0   |   |  |
| Deptor I                               | Shakasha<br>First Name   | Middle I   | Orr Name Last Name  |   |  |
| Debtor 2                               | ine) =   |  |   |   |  |
| (Spouse, if fil                        | <sup>ing)</sup> First Name   | Middle I   | Name Last Name  |   |  |
| United Sta                             | ites Bankruptcy Cou  | rt for the: Northern   | District of Illinois (State)  |   |  |
| Case num                               | ber  |  | (etato)   |   |  |
|  |  |  |   |   | Check if this is an  |
| Officia                                | l Form 106   | <u>A/B</u>   |   |   | amended filing   |
| Sched                                  | dule A/B: F  | Property   |   |   | 12/1   |
| category v<br>responsibl<br>write your | where you think it is<br>e for supplying count<br>name and case nu | fits best. Be as complete a<br>rect information. If more s<br>umber (if known). Answer o | • •   | ole are filing together, both a<br>this form. On the top of any a | re equally   |
|  |  | _  | nd, or Other Real Estate You Own or H                                       |   |  |
|  | own or have any l<br>No. Go to Part 2                              | egal or equitable interest   | in any residence, building, land, or similar pr                             | operty?   |  |
|  |  | rapartu?   |   |   |  |
| ш                                      | Yes. Where is the p  | roperty:   | What is the property? Check all that apply.                                 | Do not deduct secured   | claims or exemptions. Put                                  |
| 1.1                                    |  |  | Single-family home  | the amount of any secu  | red claims on Schedule D:                                  |
|  | Street address, if av  | railable, or other description   | Duplex or multi-unit building   |   | ims Secured by Property.                                   |
|  | -  |  | Condominium or cooperative  | Current value of the<br>entire property?                          | Current value of the portion you own?                      |
|  |  |  | Manufactured or mobile home   |   | <u> </u>   |
|  | Number Stree   | t  | Land Investment property  | Describe the nature o   | f your ownership   |
|  |  |  | Timeshare   | interest (such as fee s<br>the entireties, or a life              |  |
|  | City   | State Zip Code   | Other   |   |  |
|  |  |  | Who has an interest in the property? Check one.                             |   | mmunity property   |
|  |  |  | Debtor 1 only   |   |  |
|  |  |  | Debtor 2 only   |   |  |
|  |  |  | Debtor 1 and Debtor 2 only  |   |  |
|  |  |  | At least one of the debtors and another                                     |   |  |
|  |  |  | Other information you wish to add about the property identification number: | nis item, such as local   |  |
| If you                                 | own or have more t   | han one, list here:  |   |   |  |
| 1.2                                    |  |  | What is the property? Check all that apply.                                 |   | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.2                                    | Street address, if av  | railable, or other description   | Single-family home  Duplex or multi-unit building                           | Creditors Who Have Cla  | ims Secured by Property.                                   |
|  |  |  | Condominium or cooperative  | Current value of the  | Current value of the portion you own?                      |
|  |  |  | Manufactured or mobile home   | entire property?  | ——————————————————————————————————————                     |
|  | Number Stree   | t  | Land  | Describe the nature o   | f vour ownership   |
|  |  |  | Investment property Timeshare   | interest (such as fee s   | simple, tenancy by   |
|  | City   | State Zip Code   | Other   | the entireties, or a life   | e estate), if Known.                                       |
|  |  |  | Who has an interest in the property? Check one.                             |   | mmunity property   |
|  |  |  | Debtor 1 only   | Ш   |  |
|  |  |  | Debtor 2 only   |   |  |
|  |  |  | Debtor 1 and Debtor 2 only  |   |  |
|  |  |  | At least one of the debtors and another                                     |   |  |
|  |  |  | Other information you wish to add about the property identification number: | nis item, such as local   |  |

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| Debtor 1    |  |                          | Orr   | Case number       | (if known)   |   |
|-------------|--|--------------------------|---|-------------------|--|---|
|             | First Name   | Middle Name              | Last Name   |                   |  |   |
| 1.3 <u></u> | et address, if available, or ot                            |                          | What is the property? Check all that Single-family home   | apply.            | the amount of any secu   | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. |
|             |  | [                        | Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  |                   | Current value of the entire property?                                    | Current value of the portion you own?   |
| Nun         | nber Street State  | Zip Code                 | Land Investment property Timeshare Other  |                   | Describe the nature or interest (such as fee s the entireties, or a life | imple, tenancy by   |
|             |  | [<br>[<br>[              | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | other             | Check if this is co (see instructions)                                   | mmunity property  |
| 0 444       | the dellar value of the no                                 | •                        | oroperty identification number:<br>all of your entries from Part 1, incl  | udina any antria  | o for nages  |   |
|             | ve attached for Part 1. Wr                                 | ite that number h        | ere.  | duing any entries | s for pages  |   |
| Do you ow   |  | equitable interest       | t in any vehicles, whether they are<br>also report it on Schedule G: Executo  | -                 | -  |   |
| 3. Cars, va | ns, trucks, tractors, sport ut                             |                          | •   | .,                | опот <b>р</b> иос <b>2</b> 00000.  |   |
| 3.1         | s<br>Make<br>Model:<br>Year:                               | Nissan<br>Sentra<br>2007 | Who has an interest in the proone.  Debtor 1 only   | perty? Check      | the amount of any secu   | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.      |
|             | Approximate mileage: Other information: 2007 Nissan Sentra | 100000                   | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar   | nd another        | Current value of the entire property?<br>\$3175.00                       | Current value of the portion you own?<br>\$3175.00                                  |
|             |  |                          | Check if this is community instructions)  | property (see     |  |   |
| 3.2         | Make<br>Model:<br>Year:                                    |                          | Who has an interest in the proone.  Debtor 1 only   | perty? Check      | the amount of any secu   | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.      |
|             | Approximate mileage: Other information:                    |                          | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar   | nd another        | Current value of the entire property?                                    | Current value of the portion you own?   |
|             |  |                          | Check if this is community instructions)  | property (see     |  |   |

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|      | Shakasha<br>First Name   | Middle Name  | Orr<br>Last Name   | Case number   | or (ii kiiowiy  |   |
|------|--|--------------|--|---|---|---|
|      |  | Mildale Name |  |   |   |   |
| 3.3  | Make   |              | Who has an interest in the poone.  | roperty? Check  |   | claims or exemptions. Pured claims on <i>Schedule</i>   |
|      | Model:<br>Year:  |              |  |   |   | aims Secured by Property  |
|      | Approximate mileage:   | <del></del>  | Debtor 1 only  |   | ordanoro rimo riaro dia   | anno occarca zy rreperty  |
|      | Approximate mileage.   |              | Debtor 2 only  |   | Current value of the  | Current value of the  |
|      | Other information:   |              | Debtor 1 and Debtor 2 only   | У   | entire property?  | portion you own?  |
|      |  |              | At least one of the debtors  | and another   |   |   |
|      |  |              | Check if this is communi   | ty property (see  |   |   |
|      |  |              | instructions)  |   |   |   |
| 3.4  | Make   |              | Who has an interest in the p   | roperty? Check  |   | claims or exemptions. P   |
|      | Model:   |              | one.   |   |   | red claims on Schedule  |
|      | Year:  |              | Debtor 1 only  |   | Creditors vvno Have Cia   | aims Secured by Property  |
|      | Approximate mileage:   |              | Debtor 2 only  |   | Current value of the  | Current value of the  |
|      | Other information:   |              | Debtor 1 and Debtor 2 only   | y   | entire property?  | portion you own?  |
|      |  |              | At least one of the debtors  | and another   |   |   |
|      |  |              | Check if this is communi   | ty property (see  |   |   |
|      |  |              | instructions)  |   |   |   |
| Exar | mples: Boats, trailers, motors   | •            | er recreational vehicles, other v<br>t, fishing vessels, snowmobiles, m  | •   |   |   |
| Exar | nples: Boats, trailers, motors<br>No<br>Yes  | •            |  | otorcycle accessori   | Do not deduct secured the amount of any secu  | claims or exemptions. Prived claims on <i>Schedule</i>  |
| Exar | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:   | •            | t, fishing vessels, snowmobiles, m  Who has an interest in the p   | otorcycle accessori   | Do not deduct secured the amount of any secu  | •   |
| Exar | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:  | •            | t, fishing vessels, snowmobiles, m  Who has an interest in the plone.  | otorcycle accessori   | Do not deduct secured the amount of any secu  | red claims on Schedule  |
| Exar | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:   | •            | t, fishing vessels, snowmobiles, m  Who has an interest in the prone.  Debtor 1 only   | otorcycle accessori   | Do not deduct secured the amount of any secu Creditors Who Have Cla   | red claims on Schedule aims Secured by Property   |
| Exar | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:   | •            | who has an interest in the prone.  Debtor 1 only Debtor 2 only   | otorcycle accessori   | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule<br>nims Secured by Property<br>Current value of the   |
| Exar | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:   | •            | who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors  | otorcycle accessori roperty? Check  y and another             | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule<br>nims Secured by Property<br>Current value of the   |
| Exar | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:   | •            | who has an interest in the pone.  Debtor 1 only Debtor 2 only Debtor 2 only  | otorcycle accessori roperty? Check  y and another             | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule<br>nims Secured by Property<br>Current value of the   |
| 4.1  | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:   | •            | who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi   | roperty? Check  y and another ty property (see                | Do not deduct secured the amount of any secu Creditors Who Have Cla   | rred claims on Schedule<br>nims Secured by Property<br>Current value of the   |
| 4.1  | nples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model:                            | •            | who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)   | roperty? Check  y and another ty property (see                | Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured the amount of any secu   | claims or Schedule control of the portion you own?  claims or exemptions. Princed claims on Schedule  |
| 4.1  | mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year:                      | •            | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the property of the propert | roperty? Check  y and another ty property (see                | Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured the amount of any secu   | red claims on Schedule aims Secured by Property  Current value of the portion you own?  |
| 4.1  | nples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model:                            | •            | who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the prone.  | roperty? Check  y and another ty property (see                | Do not deduct secured the amount of any secu Creditors Who Have Clas  Current value of the entire property?  Do not deduct secured the amount of any secu   | claims or Schedule control of the portion you own?  claims or exemptions. Princed claims on Schedule  |
| 4.1  | mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year:                      | •            | Who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only   | roperty? Check  y and another ty property (see                | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classifications                     | red claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Property aims Secured by Property   |
| 4.1  | mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: | •            | who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the prone. Debtor 1 only Debtor 2 only  | roperty? Check  and another ty property (see roperty? Check   | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Property ared claims on Schedule aims Secured by Property  Current value of the |
| 4.1  | mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: | •            | who has an interest in the prone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions)  Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only  | roperty? Check  y and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Property ared claims on Schedule aims Secured by Property  Current value of the |

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Orr Debtor 1 Shakasha Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... used furniture \$600.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... used electronics \$650.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used clothing \$215.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1465.00 for Part 3. Write that number here .....

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Debtor 1 Shakasha Orr Case number (if known) Middle Name Last Name First Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$0.00 17.1. Checking account: Chase 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Shakasha  |   | Orr                        | Case number (if known)                      | <u> </u> |  |
|------|---|---|----------------------------|---|----------|--|
|      | First Name  | Middle Name   | Last Name                  |   |          |  |
| 20.  | 20. Government and corporate bonds and other negotiable and non-negotiable instruments  Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. |   |                            |   |          |  |
|      | Yes. Give specific information about them   | Issuer name:  |                            |   |          |  |
|      |   |   |                            |   |          |  |
| 21   | Retirement or pension   | accounts  |                            |   |          |  |
|      | Examples: Interests in I  |   | , thrift savings accounts  | s, or other pension or profit-sharing plans |          |  |
|      | ✓ No  Yes. List each  | Type of account:  | Institution name:          |   |          |  |
|      | account separately.   | 401(k) or similar plan:   |                            |   |          |  |
|      |   | Pension plan:   |                            |   |          |  |
|      |   | IRA:  |                            |   |          |  |
|      |   | Retirement account:   |                            |   |          |  |
|      |   | Keogh:  |                            |   |          |  |
|      |   | Additional account:   |                            |   |          |  |
|      |   | Additional account:   |                            |   |          |  |
| 22.  |   | prepayments d deposits you have made so that with landlords, prepaid rent, public |                            |   |          |  |
|      | Yes   | Electric:   |                            |   |          |  |
|      |   | Gas:  |                            |   |          |  |
|      |   | Heating oil:  |                            |   |          |  |
|      |   | Security deposit on rental unit:  |                            |   |          |  |
|      |   | Prepaid rent:   |                            |   |          |  |
|      |   | Telephone:  |                            |   |          |  |
|      |   | Water:  |                            |   |          |  |
|      |   | Rented furniture:   |                            |   |          |  |
|      |   | Other:  |                            |   |          |  |
| 23.  | _   | or a periodic payment of money to   | you, either for life or fo | r a number of years)                        |          |  |
|      | ✓ No  Yes   | Issuer name and description:  |                            |   |          |  |
|      |   |   |                            |   |          |  |
|      |   |   |                            |   |          |  |
|      |   |   |                            |   |          |  |

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| Debt | or 1 Shakasha First Name  | Middle No   | Orr<br>ame Last Name   | Case number (if known)   |   |
|------|---|---|--|--|---|
| 24.  | Interests in an ed  |   | ount in a qualified ABLE program, or u   | nder a qualified state tuition program.  |   |
|      | ✓ No  | (b)(1), 529A(b), and 529(b  | on. Separately file the records of any inte  | erests.11 U.S.C. § 521(c):   |   |
|      |   |   |  |  |   |
|      |   |   |  |  |   |
| 25.  | Trusts, equitable exercisable for y   | •   | operty (other than anything listed in I  | ine 1), and rights or powers   |   |
|      | ✓ No Yes. Describe.   |   |  |  |   |
| 26.  |   |   | ecrets, and other intellectual propert<br>, proceeds from royalties and licensing a                                      | =  |   |
|      | ✓ No Yes. Describe  |   |  |  |   |
| 27.  |   | ises, and other general i<br>g permits, exclusive license   | ntangibles<br>es, cooperative association holdings, liqu   | or licenses, professional licenses   |   |
|      | No Yes. Describe.   |   |  |  |   |
|      |   |   |  |  |   |
|      |   |   |  |  |   |
| Mor  | ney or property o   | owed to you?  |  |  | Current value of the portion you own?  Do not deduct secured claims or exemptions.                                |
|      | Tax refunds owed  |   |  |  | portion you own? Do not deduct secured  |
|      | Tax refunds owed  No Yes. Give spec   | to you  |  | Federal:   | portion you own? Do not deduct secured  |
|      | Tax refunds owed  No Yes. Give specabout the you alrea  | to you  ific information em, including whether dy filed the returns   |  | Federal:<br>State:   | portion you own?  Do not deduct secured claims or exemptions.   |
| 28.  | Tax refunds owed  No Yes. Give speciabout the you alrea and the t   | to you  ific information em, including whether  |  |  | portion you own? Do not deduct secured claims or exemptions.  |
| 28.  | Tax refunds owed  No Yes. Give speciabout the you alreated and the terminal support   | to you  ific information em, including whether dy filed the returns ax years                                    | pousal support, child support, maintenan   | State:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                              |
| 28.  | Tax refunds owed  No Yes. Give spectors about the you alreated and the total support Examples: Past due.  No  | to you  iffic information em, including whether dy filed the returns ax years                                   | pousal support, child support, maintenan   | State: Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                              |
| 28.  | Tax refunds owed  No Yes. Give spectors about the you alreated and the total support Examples: Past due.  No  | to you  ific information em, including whether dy filed the returns ax years                                    | pousal support, child support, maintenan   | State:  Local:  ce, divorce settlement, property settlemen   | portion you own?  Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                             |
| 28.  | Tax refunds owed  No Yes. Give spectors about the you alreated and the total support Examples: Past due.  No  | to you  iffic information em, including whether dy filed the returns ax years                                   | pousal support, child support, maintenan   | State: Local: ce, divorce settlement, property settlemen Alimony:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t                           |
| 28.  | Tax refunds owed  No Yes. Give spectors about the you alreated and the total support Examples: Past due.  No  | to you  iffic information em, including whether dy filed the returns ax years                                   | pousal support, child support, maintenan   | State:  Local:  ce, divorce settlement, property settlemen  Alimony:  Maintenance:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00                       |
| 28.  | Tax refunds owed  ✓ No  Yes. Give spectors about the you alreat and the total support Examples: Past due  ✓ No  Yes. Give spectors about the you alreat and the total support Examples: Past due  ✓ No  Yes. Give spectors  | to you  iffic information em, including whether dy filed the returns ax years                                   | pousal support, child support, maintenan   | State: Local:  ce, divorce settlement, property settlemen  Alimony:  Maintenance:  Support:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00               |
| 28.  | Tax refunds owed  ✓ No  ☐ Yes. Give spect about the you alreat and the the term of the te | ific information em, including whether dy filed the returns ax years e or lump sum alimony, sp ific information | pousal support, child support, maintenan<br>e payments, disability benefits, sick pay, v<br>ans you made to someone else | State: Local:  ce, divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00 \$0.00 |
| 28.  | Tax refunds owed  ✓ No  ☐ Yes. Give spect about the you alreat and the the term of the te | ific information em, including whether dy filed the returns ax years e or lump sum alimony, sp ific information | e payments, disability benefits, sick pay, v   | State: Local:  ce, divorce settlement, property settlemen  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb <sup>-</sup> | tor 1 Shakasha  |                           | Orr   | Case number (if known)                       |  |
|------------------|---|---------------------------|---|--|--|
|                  | First Name  | Middle Name               | Last Name   |  |  |
| 31.              | Interests in insurance paramples: Health, disability  |                           | alth savings account (HSA); credit,                                 | homeowner's, or renter's insurance           |  |
|                  | Yes. Name the insura of each policy and lis   |                           | Company name:   | Beneficiary:                                 | Surrender or refund value  |
| 32.              | Any interest in property If you are the beneficiary property because someon  No Yes. Describe | of a living trust, expect |   | cy, or are currently entitled to receive     |  |
| 33.              | Claims against third pa   |                           | you have filed a lawsuit or made<br>urance claims, or rights to sue | e a demand for payment                       |  |
| 34.              | Other contingent and uto set off claims  No Yes. Describe                                     | ınliquidated claims o     | fevery nature, including counter                                    | rclaims of the debtor and rights             |  |
| 35.              | Any financial assets you  No Yes. Describe  | u did not already list    |   |  |  |
| 36.              |   | -                         | m Part 4, including any entries f                                   |  |  |
| Part             | 5: Describe Any Bu  | siness-Related Pro        | pperty You Own or Have an   | Interest In. List any real estate in F       | Part 1.  |
| 37.              | No. Go to Part 6.  Yes. Go to line 38.  | / legal or equitable in   | terest in any business-related p                                    | roperty?                                     | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38.              | Accounts receivable or  | commissions you alr       | eady earned   |  | or exemptions  |
|                  | Yes. Describe   |                           |   |  |  |
| 39.              | . No  |                           | e, modems, printers, copiers, fax m                                 | nachines, rugs, telephones, desks, chairs, d | electronic devices   |
|                  | Yes. Describe   |                           |   |  |  |
|                  |   |                           |   |  |  |

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| Deb      | tor 1 Shakasha                       |  | umber (if known)     |   |
|----------|--------------------------------------|--|----------------------|---|
|          | First Name                           | Middle Name Last Name  |                      |   |
| 40.      | Machinery, fixtures, equ             | uipment, supplies you use in business, and tools of your trade   |                      |   |
|          | <b>✓</b> No                          |  |                      |   |
|          | Yes. Describe                        |  |                      |   |
|          |                                      |  |                      |   |
|          |                                      | <u> </u>   |                      |   |
| 41.      | Inventory                            |  |                      |   |
|          | <b>✓</b> No                          |  |                      |   |
|          | Yes. Describe                        |  |                      |   |
|          |                                      |  |                      |   |
|          |                                      |  |                      |   |
| 42.      | Interests in partnership             | s or joint ventures  |                      |   |
|          | ✓ No                                 |  |                      |   |
|          | <b>=</b>                             | Name of entity:  | % of ownership:      |   |
|          | Yes. Give specific information about |  |                      |   |
|          | them                                 |  |                      |   |
|          |                                      |  |                      |   |
|          |                                      |  |                      |   |
| 43       | Customer lists, mailing li           | ists, or other compilations  |                      |   |
|          | _                                    | 3.5, 3. 3 33pa   |                      |   |
|          | <b>✓</b> No                          |  |                      |   |
|          | Yes. Do your lists inc               | clude personally identifiable information (as defined in 11 U.S.C. § 101(41A   | ))?                  |   |
|          | ☐ No                                 |  |                      |   |
|          | Yes. Describ                         |  |                      |   |
|          | L Tes. Describ                       | JG   |                      | ·   |
| 44.      | Any business-related pr              | roperty you did not already list   |                      |   |
|          | —                                    |  |                      |   |
|          | No                                   |  |                      | <u> </u>                                      |
|          | Yes. Give specific information       |  |                      |   |
|          | imomation                            |  |                      | <del>-</del>                                  |
|          |                                      |  |                      |   |
|          |                                      |  |                      |   |
|          |                                      |  |                      | <u> </u>                                      |
|          |                                      |  |                      | _   |
|          |                                      |  |                      |   |
|          |                                      |  |                      | _   |
| 45. A    | dd the dollar value of all           | of your entries from Part 5, including any entries for pages you have  | attached             |   |
|          |                                      | here   |                      |   |
| <u> </u> | D                                    | I December 1971 British Britis |                      |   |
| Pari     |                                      | rm- and Commercial Fishing-Related Property You Own or laterest in farmland, list it in Part 1.  | have an interest in. |   |
|          |                                      |  |                      |   |
| 46.      | Do you own or have any               | y legal or equitable interest in any farm- or commercial fishing-relat   |                      |   |
|          | No. Go to Part 7.                    |  |                      | Current value of the                          |
|          | Yes. Go to line 47.                  |  |                      | portion you own? Do not deduct secured claims |
|          |                                      |  |                      | or exemptions                                 |
| 47.      | Farm animals                         |  |                      |   |
|          | Examples: Livestock, pou             | ultry, farm-raised fish  |                      |   |
|          | <b>✓</b> No                          |  |                      |   |
|          | Yes. Describe                        |  |                      |   |
|          | <u> </u>                             |  |                      |   |
|          |                                      |  |                      |   |

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| Debt         | or 1     | Shakasha<br>First Name   | Middle Name                            | Orr<br>Last Name        | Case number (if known)         |                                       |
|--------------|----------|--------------------------|--|-------------------------|--------------------------------|---------------------------------------|
| 48.          | Cro      | pps-either growing       |  |                         |                                |                                       |
|              | <b>✓</b> | No<br>Yes. Describe      |  |                         |                                |                                       |
| 49.          | Far      | m and fishing equip      | oment, implements, machinery, fixtu    | res, and tools of trade |                                |                                       |
|              | Ï        | Yes. Describe            |  |                         |                                |                                       |
| 50.          | Far      | m and fishing supp       | lies, chemicals, and feed              |                         |                                |                                       |
|              |          | No<br>Yes. Describe      |  |                         |                                |                                       |
| 51.          | Any      | y farm- and comme        | rcial fishing-related property you did | l not already list      |                                |                                       |
|              |          | Yes. Describe            |  |                         |                                |                                       |
|              |          |                          | I of your entries from Part 6, includi |                         | ou have attached               |                                       |
| Part 7       | 7.       | Describe All Pro         | perty You Own or Have an Inte          | ract in That You Did No | at List Above                  |                                       |
|              |          |                          | perty of any kind you did not already  |                         | ot List Above                  |                                       |
|              | Exa      |                          | s, country club membership             |                         |                                |                                       |
|              |          | No<br>Yes. Give specific |  |                         |                                |                                       |
|              | ш        | information              |  |                         |                                |                                       |
| 54. Ac       | dd tl    | he dollar value of al    | l of your entries from Part 7. Write t | hat number here         |                                |                                       |
|              |          |                          |  |                         |                                |                                       |
|              |          |                          |  |                         |                                |                                       |
| Part 8       | 3:       | List the Totals of       | Each Part of this Form                 |                         |                                | · · · · · · · · · · · · · · · · · · · |
| 55. <b>F</b> | Part     | 1: Total real estate     | , line 2                               |                         | <b>&gt;</b>                    |                                       |
| 56. <b>p</b> | art      | 2 total vehicles, lin    | e 5                                    | \$3175.00               |                                |                                       |
| 57. <b>P</b> | art 3    | 3: Total personal an     | d household items, line 15             | \$1465.00               |                                |                                       |
| 58. <b>P</b> | art 4    | 4: Total financial as    | sets, line 36                          | · ·                     |                                |                                       |
| 59. <b>F</b> | art      | 5: Total business-re     | elated property, line 45               | <del></del>             |                                |                                       |
| 60. <b>F</b> | Part     | 6: Total farm- and f     | ishing-related property, line 52       |                         |                                |                                       |
| 61. <b>F</b> | Part     | 7: Total other prop      | erty not listed, line 54               |                         |                                |                                       |
| 62. <b>T</b> | otal     | l personal property.     | Add lines 56 through 61                | \$4640.00               | Copy personal property total ▶ | + \$4640.00                           |
| 63 <b>T</b>  | otal     | of all property on S     | chedule A/B. Add line 55 + line 62     |                         |                                | \$4640.00                             |
| 33.1         |          |                          |  |                         |                                |                                       |

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| Fill in this information to identify your case: |                           |             |                              |  |  |  |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1  | Shakasha                  |             | Orr                          |  |  |  |
|   | First Name                | Middle Name | Last Name                    |  |  |  |
| Debtor 2  |                           |             |                              |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |  |  |  |
| United States B                                 | Sankruptcy Court for the: | Northern    | District of Illinois (State) |  |  |  |
| Case number<br>(If known)                       |                           |             |                              |  |  |  |

#### Official Form 106C

#### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | t 1: Identify the Property You Clair   | n as Exempt  |   |   |  |  |  |
|----|--|--|---|---|--|--|--|
| 1. | Which set of exemptions are you claimi   | ing? Check one only, ev  | ven if your spouse is filing with you.  |   |  |  |  |
|    | ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)               |  |   |   |  |  |  |
|    | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)   |  |   |   |  |  |  |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. |  |   |   |  |  |  |
|    | Brief description of the property and line on Schedule A/B that lists this property                | Current value of the portion you own  Copy the value from Schedule A/B | Amount of the exemption you claim  Check only one box for each exemption.                           | Specific laws that allow exemption              |  |  |  |
|    | Brief description: Nissan Sentra, 2007, 2007 Nissan Sentra Line from Schedule A/B: 03              | \$3,175.00   | \$0  100% of fair market value, up to any applicable statutory limit                                | 735 ILCS 5/12-1001(c); 735 ILCS<br>5/12-1001(b) |  |  |  |
|    | Brief  |  |   | 735 ILCS 5/12-1001(a)                           |  |  |  |
|    | description:   | \$215.00   | \$215.00  |   |  |  |  |
|    | Used clothing Line from Schedule A/B: 11   |  | 100% of fair market value, up to any applicable statutory limit                                     | =   |  |  |  |
| 3. | ✓ No   | ery 3 years after that for   | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? |   |  |  |  |

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| Debtor  | 7 Snakasna<br>First Name Midd   | dle Name La   | orr Case number (if known)  |                                    |
|---------|---|---|---|------------------------------------|
| Part 2: | <b>-</b>  | are reality   | act wanto   |                                    |
| line    | ef description of the property and<br>e on Schedule A/B that lists this<br>operty | Current value of<br>the portion you<br>own<br>Copy the value from<br>Schedule A/B | Amount of the exemption you claim  Check only one box for each exemption. | Specific laws that allow exemption |
| Lin     | ef scription: Checking account, Chase e from hedule A/B: 17                       | \$0.00  | \$0 100% of fair market value, up to any applicable statutory limit       | 735 ILCS 5/12-1001(b)              |
| Lin     | ef scription:  used furniture e from hedule A/B: 06                               | \$600.00  | \$600.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b)              |
| Lin     | ef scription:  used electronics ef from hedule A/B:  07                           | \$650.00  | \$650.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b)              |

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|   |   | DC   | Cument Page 22 01  | 00  |  |                                    |
|---|---|--|--|---|--|------------------------------------|
| Fill in this info                             | rmation to identify your ca   | ise:   |  |   |  |                                    |
| Debtor 1                                      | Shakasha  |  | Orr  |   |  |                                    |
|   | First Name  | Middle Name  | Last Name  |   |  |                                    |
| Debtor 2<br>(Spouse, if filing)               | First Name  | Middle Name  | Last Name  |   |  |                                    |
| United States I                               | Bankruptcy Court for the:   | Northern   | District of Illinois   |   |  |                                    |
| Case number (If known)                        |   |  | (State)  |   |  |                                    |
| Official                                      | Form 106D   |  |  |   |  | Check if this is an amended filing |
| Schedu  | ule D: Credite  | ors Who Ha   | ve Claims Secur  | ed by Prop  | ertv   | 12/15                              |
| more space is name and cas  1. Do any one No. | needed, copy the Addition<br>e number (if known).<br>creditors have claims se   | ecured by your proper<br>nit this form to the court  | e are filing together, both are equalities the entries, and attach it to tarty?  with your other schedules. You have | this form. On the top   | of any additional pag                                  |                                    |
| Part 1: List                                  | All Secured Claims  |  |  |   |  |                                    |
| 2. List all separate                          | secured claims. If a credit   | nan one creditor has a par   | cured claim, list the creditor<br>ticular claim, list the other creditors<br>order according to the creditor's       | Column A  Amount of claim  Do not deduct the value of collateral. | Column B  Value of collateral that supports this claim | Column C Unsecured portion If any  |
|   | ITY AUTO LOANS IN   | Describe the property  | that secures the claim:  | \$6,277.00  | \$3,175.00   | \$3,102.00                         |
| Numi  NEW Hr City  Who ov  Del  Del  At l and | DPE MN 55428 State ZIP Code wes the debt? Check one. btor 1 only btor 2 only btor 1 and Debtor 2 only least one of the debtors d another eck if this claim relates a community debt | O36 Automobile  As of the date you file Contingent Unliquidated Disputed  Nature of lien. Check and agreement you car loan) Statutory lien (such Judgment lien from Other (including a result in the continuous such continuou | all that apply.  made (such as mortgage or secured as tax lien, mechanic's lien)  a lawsuit  ight to offset)         |   |  |                                    |
| Date de incurre                               |   | Last 4 digits of accou   | nt number6001  |   |  |                                    |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$6,277.00

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| Fill in th                            | nis information to identify you  | case:  |  |  |   |
|---------------------------------------|--|--|--|--|---|
|                                       |  |  |  |  |   |
| Debtor                                | 1 Shakasha   |  | Orr  |  |   |
|                                       | First Name   | Middle Name  | Last Name  | _  |   |
| Debtor                                |  |  |  | _  |   |
| (Spouse,                              | iffiling) First Name   | Middle Name  | Last Name  |  |   |
| United                                | States Bankruptcy Court for the  | e: Northern  | District of Illinois   | _  |   |
| Case n                                | umher  |  | (State)  |  |   |
| (If known                             |  |  |  | _  |   |
| Offic                                 | ial Form 106E/F  | -  |  |  | Check if this is an amended filing  |
|                                       |  |  |  |  | _   |
| Sch                                   | nedule E/F: Cr   | editors Who  | Have Unsecu  | red Claims   | 12/15   |
|                                       |  |  |  |  | NONPRIORITY claims. List the  |
| claims                                | D6A/B) and on Schedule G: E<br>that are listed in Schedule D<br>ries in the boxes on the left.   | xecutory Contracts and Une<br>creditors Who Hold Claims<br>Attach the Continuation Pag                         | xpired Leases (Official Form<br>Secured by Property. If mor                                  | 106G). Do not include an<br>e space is needed, copy tl | on Schedule A/B: Property (Official<br>y creditors with partially secured<br>ne Part you need, fill it out, number<br>ite your name and case number (if |
| claims<br>the ent<br>known)<br>Part 1 | D6A/B) and on Schedule G: Ethat are listed in Schedule Dries in the boxes on the left.  List All of Your PRIORI  any creditors have priority | xecutory Contracts and Une<br>creditors Who Hold Claims<br>Attach the Continuation Pag                         | xpired Leases (Official Form<br>Secured by Property. If mor<br>ge to this page. On the top o | 106G). Do not include an<br>e space is needed, copy tl | y creditors with partially secured<br>ne Part you need, fill it out, number   |
| claims<br>the ent<br>known)<br>Part 1 | D6A/B) and on Schedule G: Ethat are listed in Schedule Dries in the boxes on the left.  List All of Your PRIORI                              | ixecutory Contracts and Une<br>Creditors Who Hold Claims<br>Attach the Continuation Pag<br>TY Unsecured Claims | xpired Leases (Official Form<br>Secured by Property. If mor<br>ge to this page. On the top o | 106G). Do not include an<br>e space is needed, copy tl | y creditors with partially secured<br>ne Part you need, fill it out, number   |
| claims<br>the ent<br>known)<br>Part 1 | D6A/B) and on Schedule G: Ethat are listed in Schedule Dries in the boxes on the left.  List All of Your PRIORI  any creditors have priority | ixecutory Contracts and Une<br>Creditors Who Hold Claims<br>Attach the Continuation Pag<br>TY Unsecured Claims | xpired Leases (Official Form<br>Secured by Property. If mor<br>ge to this page. On the top o | 106G). Do not include an<br>e space is needed, copy tl | y creditors with partially secured<br>ne Part you need, fill it out, number   |

Total

claim

Priority

amount

Nonpriority

amount

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Debtor 1 Shakasha Orr Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 CHOICE RECOVERY \$85.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8/1/2013 POB 614-358-9900 Number Street As of the date you file, the claim is: Check all that apply. Contingent COLUMBUS Ohio 43220 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes City of Chicago Parking Tickets 4.2 \$4,000.00 Last 4 digits of account number Nonpriority Creditor's Name 333 South State Street, Rm 540 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60604 Chicago Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_ **Unsecured Debt** Is the claim subject to offset? **✓** No Comcast Cable c/o Xfinity \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7561 North Point Pkwy #900 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 30022 Alpharetta Georgia City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **|** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Notice Only Other. Specify \_ Is the claim subject to offset? **✓** No Yes

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Debtor 1 Shakasha Orr Case number (if known) Last Name

| After listing any entries on this page, number them beginning  | g with 4.5, followed by 4.6, and so forth.  | Total claim |
|--|---|-------------|
| Commonwealth Edison Nonpriority Creditor's Name 3 Lincoln Ctr Fl 4 Number Street   | Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  | \$0.00      |
| Oakbrook Ter Illinois 60181 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  No Yes  | Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify Notice Only  |             |
| MED BUSI BUR Nonpriority Creditor's Name 1460 RENAISSANCE D SUITE 400 Number Street  | Last 4 digits of account number 7436 When was the debt incurred? 5/1/2013  As of the date you file, the claim is: Check all that apply.   | \$203.00    |
| PARK RIDGE Illinois 60068  City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?   | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL  |             |
| ✓ No     Yes  Navient Nonpriority Creditor's Name  | Last 4 digits of account number0712   | \$23,998.0  |
| PO BOX 9500 Number Street  WILKES BARRE Pennsylvania 18773 City State Zip Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim relates to a community debt  Is the claim subject to offset? | When was the debt incurred? 7/1/2007  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  ✓ Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify |             |

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Debtor 1 Shakasha Orr Case number (if known) Last Name

| Part 2 | Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page  |   |             |  |  |
|--------|--|---|-------------|--|--|
|        | After listing any entries on this page, number them beginning  | with 4.5, followed by 4.6, and so forth.  | Total claim |  |  |
| 4.7    | Peoples Gas Light & Coke Co.  Nonpriority Creditor's Name 200 E. Randolph St.  Number Street   | When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply.  | \$0.00      |  |  |
|        | Chicago Illinois 60601 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  ✓ No  Yes  | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Notice Only   |             |  |  |
| 4.8    | PORTFOLIO RECOVERY ASS Nonpriority Creditor's Name 120 CORPORATE BLVD STE 1 Number Street  NORFOLK Virginia 23502 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  Yes | Last 4 digits of account number 3854 When was the debt incurred? 8/1/2014  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify capital one | \$559.00    |  |  |
| 4.9    | PRESTIGE FINANCIAL SVC Nonpriority Creditor's Name 1420 S 500 W Number Street  SALT LAKE CITY Utah 84115 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  No Yes                    | When was the debt incurred? 12/1/2011  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Unsecured                                       | \$17,449.00 |  |  |

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Orr Debtor 1 Shakasha \_ Case number (if known) Middle Name Last Name First Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 RPM Investors LLC \$4,015.00 Last 4 digits of account number Nonpriority Creditor's Name 120 W MADISON ST#701 When was the debt incurred? As of the date you file, the claim is: Check all that apply. c/o Jerome D. Citron, Attorney at Law Contingent Unliquidated 60602 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify unsecured debt 14M1702236 Is the claim subject to offset? **✓** No Yes

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Debtor 1 Shakasha Orr Case number (if known) Middle Name Last Name First Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Law Office of Michael J. Torchalski On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 820 E. Terra Cotta Avenue Suite 207 Line 4.9 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured 60014 Crystal Lake Illinois Last 4 digits of account number 5486 City State Zip Code Harris & Harris LTD On which entry in Part 1 or Part 2 did you list the original creditor? 111 West Jackson Boulevard Suite 400 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Chicago Illinois 60604 Last 4 digits of account number

City

State

Zip Code

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Debtor 1 Shakasha Orr Case number (if known)
First Name Middle Name Last Name

| i ii st i vai            | ividate varie Last varie   |         |                               |
|--------------------------|--|---------|-------------------------------|
| Part 4: Add th           | ne Amounts for Each Type of Unsecured Claim  |         |                               |
|                          | mounts of certain types of unsecured claims. This information is<br>nounts for each type of unsecured claim. | s for s | tatistical reporting purposes |
|                          |  |         | Total claims                  |
| Total claims from Part 1 | 6a. Domestic support obligations.  | 6a.     | \$0.00                        |
|                          | 6b. Taxes and certain other debts you owe the government   | 6b.     | \$0.00                        |
|                          | 6c. Claims for death or personal injury while you were intoxicated   | 6c.     | \$0.00                        |
|                          | 6d. Other. Add all other priority unsecured claims. Write that   | 6d.     | \$0.00                        |
|                          | amount here.  6e. Total. Add lines 6a through 6d.  | 6e.     | \$0.00                        |
|                          | oe. Total. Add lilles oa tillough od.  | oe.     |                               |
|                          |  |         | Total claims                  |
| Total claims from Part 2 | 6f. Student loans  | 6f.     | \$23,998.00                   |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6g.     | \$0.00                        |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts  | 6h.     | \$0.00                        |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write   | 6i.     | \$26,311.00                   |
|                          | that amount here.  |         |                               |
|                          | 6j. Total. Add lines 6f through 6i.  | 6j.     | \$50,309.00                   |

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| Fill in this information to identify your case: |                           |             |                      |  |  |
|---|---------------------------|-------------|----------------------|--|--|
| Debtor 1  | Shakasha                  |             | Orr                  |  |  |
|   | First Name                | Middle Name | Last Name            |  |  |
| Debtor 2  |                           |             |                      |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |  |  |
| United States E                                 | Sankruptcy Court for the: | Northern    | District of Illinois |  |  |
| Case number                                     |                           |             | (State)              |  |  |
| (If known)                                      |                           |             |                      |  |  |

#### Official Form 106G

### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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|           |                                |   | DC                             | cument rage                 | JC 31 01 00  |
|-----------|--------------------------------|---|--------------------------------|-----------------------------|--|
| Fill in t | his infori                     | nation to identify your c                     | ase:                           |                             |  |
| Debtor    | 1                              | Shakasha                                      | A4: 1 11 A1                    | Orr                         |  |
| Debtor    | 2                              | First Name                                    | Middle Name                    | Last Name                   |  |
| (Spouse   | , if filing)                   | First Name                                    | Middle Name                    | Last Name                   |  |
| United    | States B                       | ankruptcy Court for the:                      | Northern                       | District of Illinois        |  |
| Case n    | umber                          |   |                                | (State)                     |  |
|           | ,                              |   |                                |                             | Check if this is an  |
| O ((;     |                                | - 40011                                       |                                |                             | amended filing   |
| Offi      | cıal                           | Form 106H                                     |                                |                             |  |
| Sch       | edul                           | H: Your Cod                                   | lebtors                        |                             | 12/15  |
| 1. Do     | . Answe<br>you ha<br>No<br>Yes | r every question.<br>ve any codebtors? (If yo | ou are filing a joint case, do | not list either spouse as a | , and the second |
|           | aho, Lou                       | isiana, Nevada, New Mex                       | kico, Puerto Rico, Texas, W    |                             | y? (Community property states and territories include Arizona, California, sin.)   |
|           |                                | Go to line 3.<br>Did vour spouse, forme       | er spouse, or legal equiva     | lent live with you at the t | e time?  |
| L         |                                | No  | or operation, or logal equive  | aone avo wan you de a o     | o uno.   |
|           |                                | es. In which communit                         | y state or territory did you   | u live?                     | Fill in the name and current address of that person.   |
|           |                                | Name of your spouse, f                        | ormer spouse, or legal equ     | ivalent                     |  |
|           |                                | Number Street                                 |                                |                             |  |
|           |                                | City  | State                          | Zip Co                      | Code   |
|           |                                | •   | •                              | •                           | or if your spouse is filing with you. List the person shown in line 2  |

again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D),

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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|   |  | 200  | Samone                        | . ago (         | 32 0. <b>0</b> 0 |   |                    |
|---|--|--|-------------------------------|-----------------|------------------|---|--------------------|
| Fill in this in                                 | nformation to identify   | your case:   |                               |                 |                  |   |                    |
| Debtor 1  | Shakasha   |  | Orr                           |                 |                  |   |                    |
|   | First Name   | Middle Name  | Last N                        | ame             | — Ch             | neck if this is:  |                    |
| Debtor 2  | g) First Name  | Middle Name  | I and M                       |                 | _                | An amended filing   |                    |
| (Spouse, II IIIII                               | 9) First Name  | Middle Name  | Last N                        |                 |                  | A supplement showing post-p                                 | otition chapter 13 |
| United States the: Case number                  | s Bankruptcy Court for   | Northern   | District of Illi              | inois<br>State) | -   -            | expenses as of the following d                              |                    |
| (If known)                                      |  |  |                               |                 |                  | MM / DD / YYYY  |                    |
| Official  | Form 106I  |  |                               |                 |                  |   |                    |
| Schedu  | ıle I: Your İn   | come   |                               |                 |                  |   | 12/15              |
| spouse. If m<br>number (if k                    | •  | , attach a separate she<br>y question.                   | •                             |                 | • •              | o not include information at<br>tional pages, write your na | •                  |
| 1. Fill in yo informat                          | our employment   |  | Debtor 1                      |                 |                  | Debtor 2  |                    |
|   |  | Employment status  | <b>✓</b> Emplo                | yed             |                  | Employed  |                    |
| attach a  | we more than one job,<br>separate page with<br>on about additional | 0  | Not Er                        | nployed         |                  | Not Employed  |                    |
| . ,   | oart time, seasonal, or  | Occupation   |                               |                 |                  |   |                    |
|   | loyed work.  | Employer's name  | Amazon C                      | om DEDC L       | LG.              | _   |                    |
| •   | on may include student maker, if it applies.                       | Employer's address                                       | P.O. Box 80726  Number Street |                 | Number Street    |   |                    |
|   |  |  |                               |                 |                  | _   |                    |
|   |  |  | Seattle                       |                 | ington 98108     |   |                    |
|   |  |  | City                          | State           | Zip Code         | City State  | Zip Code           |
|   |  | How long employed there?                                 |                               |                 |                  |   |                    |
| Part 2: G                                       | ive Details About N  | Nonthly Income   |                               |                 |                  |   |                    |
| spouse unle<br>If you or you                    | ess you are separated.   | e more than one employer,                                | •                             | information     |                  | write \$0 in the space. Include y                           |                    |
|   |  | ary, and commissions (before, calculate what the monthly |                               | 2.              | \$2,141.53       | non-filing spouse   |                    |
| 3. Estima                                       | ite and list monthly over  | rtime pay.   |                               | 3.              | + \$0.00         |   |                    |
| 4. Calculate gross income. Add line 2 + line 3. |  |  | 4.                            | \$2,141.53      |                  |   |                    |

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| Debto                 | r 1Shakasha First Name Middle Name   | Orr<br>Last Name     | Case number               |                                   |                         |
|-----------------------|--|----------------------|---------------------------|-----------------------------------|-------------------------|
|                       | Thorraine modername  | Last Namo            | known) For Debtor 1       | For Debtor 2 or non-filing spouse |                         |
| Сор                   | y line 4 here  | <b>→</b> 4.          | \$2,141.53                |                                   |                         |
| 5. List               | all payroll deductions:  |                      |                           |                                   |                         |
| 5a.                   | Tax, Medicare, and Social Security deductions  | 5a.                  | \$345.91                  |                                   |                         |
| 5b.                   | Mandatory contributions for retirement plans   | 5b.                  | \$0.00                    |                                   |                         |
| 5c.                   | Voluntary contributions for retirement plans   | 5c.                  | \$0.00                    |                                   |                         |
| 5d.                   | Required repayments of retirement fund loans   | 5d.                  | \$0.00                    |                                   |                         |
| 5e.                   | Insurance  | 5e.                  | \$0.00                    |                                   |                         |
| 5f. l                 | Domestic support obligations   | 5f.                  | \$0.00                    |                                   |                         |
| 5g.                   | Union dues   | 5g.                  | \$0.00                    |                                   |                         |
| 5h.                   | Other deductions. Specify:   | 5h. +                | \$0.00 +                  |                                   |                         |
| 6. <b>Add</b><br>+5h. | the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e   | +5f + 5g 6.          | \$345.91                  |                                   |                         |
| 7. Cald               | culate total monthly take-home pay. Subtract line 6 from I   | line 4. 7.           | \$1,795.63                |                                   |                         |
| 8. List               | all other income regularly received:   |                      |                           |                                   |                         |
|                       | Net income from rental property and from operating a business, profession, or farm   |                      |                           |                                   |                         |
|                       | Attach a statement for each property and business showing gross receipts, ordary and necessary business expenses, a  |                      | \$0.00                    |                                   |                         |
|                       | the total monthly net income.  Interest and dividends  | 8a.<br>8b.           | \$0.00                    | <del></del>                       |                         |
| 8c.                   | Family support payments that you, a non-filing spouse, dependent regularly receive   |                      | \$0.00                    |                                   |                         |
|                       | Include alimony, spousal support, child support, maintenand divorce settlement, and property settlement.   | ce,<br>8c.           | \$0.00                    |                                   |                         |
|                       | Unemployment compensation  | 8d.                  | \$0.00                    |                                   |                         |
|                       | Social Security  | 8e.                  | \$0.00                    |                                   |                         |
| <br>                  | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (bene under the Supplemental Nutrition Assistance Program) or housing subsidies Specify:  Food Assistance Programs Income | -                    | \$11.00                   |                                   |                         |
|                       | Pension or retirement income   | 8g.                  | \$0.00                    |                                   |                         |
| 8h.                   | Other monthly income. Specify:   | 8h. +                | \$0.00 +                  |                                   |                         |
|                       | all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8  |                      | \$11.00                   |                                   |                         |
|                       | culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing  | 10.<br>g spouse      | \$1,806.63 +              | =                                 | \$1,806.63              |
| Incl<br>frier         | ate all other regular contributions to the expenses that young contributions from an unmarried partner, members of youngs or relatives.  not include any amounts already included in lines 2-10 or an  | our household, you   | ır dependents, your roomn |                                   |                         |
| Spe                   | ecify:   |                      |                           | 11.                               | + \$0.00                |
|                       | Id the amount in the last column of line 10 to the amount te that amount on the Summary of Schedules and Statistical   |                      |                           |                                   | \$1,806.63              |
|                       |  |                      |                           |                                   | Combined monthly income |
| 13. <b>Do</b>         | you expect an increase or decrease within the year afton   | er you file this for | m?                        |                                   |                         |
|                       |  |                      |                           |                                   |                         |
|                       | Yes. Explain:  |                      |                           |                                   |                         |
|                       |  |                      |                           |                                   |                         |

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|                                   |  | Docu  | iment Page 34 of 6   | 3                     |                                 |
|-----------------------------------|--|---|--|-----------------------|---------------------------------|
| Fill in this infor                | mation to identify yo                          | ur case:  |  |                       |                                 |
| Debtor 1                          | Shakasha                                       |   | Orr  |                       |                                 |
|                                   | First Name                                     | Middle Name   | Last Name  | Check if this is:     |                                 |
| Debtor 2<br>(Spouse, if filing)   | First Name                                     | Middle Name   | Last Name  | An amended fili       | ng                              |
| United States E                   | Bankruptcy Court for t                         | he: Northern [  | District of Illinois   |                       | howing post-petition chapter 13 |
| Case number                       |  |   | (State)  | expenses as or        | the following date:             |
| (If known)                        |  |   |  | MM / DD / YYYY        | <del></del>                     |
| Official                          | Form 106                                       | J   |  |                       |                                 |
| Schedul                           | e J: Your Ex                                   | xpenses   |  |                       | 12/15                           |
| information. If                   | -  |   | re filing together, both are equal<br>form. On the top of any addition |                       |                                 |
| Part 1: Des                       | cribe Your House                               | ehold   |  |                       |                                 |
| 1. Is this a joi                  | nt case?                                       |   |  |                       |                                 |
| ✓ No. Go                          | to line 2                                      |   |  |                       |                                 |
| Yes. D                            | oes Debtor 2 live in                           | a separate household?   |  |                       |                                 |
| _ [                               | No   |   |  |                       |                                 |
|                                   | Yes. Debtor 2 mus                              | st file Official Forms 106J-2, Exper                                      | nses for Separate Household of Deb                                     | tor 2.                |                                 |
| 2. Do you hav                     | e dependents?                                  | No  |  |                       |                                 |
| Do not list Debtor 2.             | Debtor 1 and                                   | Yes. Fill out this information for each dependent                         | Dependent's relationship to  | Dependent's           | Does dependent live             |
| Debiol 2.                         |  | each dependent  | Debtor 1 or Debtor 2 Child   | <b>age</b><br>6 years | with you?                       |
|                                   |  |   | Office   |                       | Yes.                            |
|                                   |  |   | Child  | 15 years              | No.                             |
|                                   |  |   |  |                       | ✓ Yes.                          |
|                                   | penses include<br>f people other               | No  |  |                       |                                 |
| than<br>yourself an<br>dependents | -  | Yes   |  |                       |                                 |
|                                   |  | ng Monthly Expenses   |  |                       |                                 |
|                                   |  | <del></del>   |  |                       | •                               |
| _                                 | of a date after the ba                         |   | ou are using this form as a supp<br>plemental Schedule J, check the    | •                     | -                               |
|                                   | •  | on-cash government assistance<br>ed it on <i>Schedule I: Your Incom</i> e | -  |                       | Your expenses                   |
|                                   | l or home ownership<br>or the ground or lot. 4 | •   | clude first mortgage payments and                                      |                       | <b>\$300.00</b>                 |
| If not inc                        | uded in line 4:                                |   |  |                       |                                 |
| 4a. Real e                        | state taxes                                    |   |  |                       | 4a <b>\$0.00</b>                |

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Shakasha Orr Case number (if known) Last Name

| riistivaille  | Middle Name Last Name  |            |                  |
|---|--|------------|------------------|
|   |  |            | Your expenses    |
| 5. Additional mortgage paymen                                       | nts for your residence, such as home equity loans                          | 5.         | \$0.00           |
| 6. Utilities:   |  |            |                  |
| 6a. Electricity, heat, natural gas                                  | 3  | 6a.        | \$0.00           |
| 6b. Water, sewer, garbage coll                                      | ection   | 6b.        | \$0.00           |
| 6c. Telephone, cell phone, Int                                      | ernet, satellite, and cable services                                       | 6c.        | \$0.00           |
| 6d. Other. Specify:   |  | 6d         | \$0.00           |
| 7. Food and housekeeping supp                                       | olies  | 7.         | \$667.00         |
| 8. Childcare and children's edu                                     | cation costs   | 8.         | \$0.00           |
| 9. Clothing, laundry, and dry cl                                    | eaning   | 9.         | \$30.00          |
| 10. Personal care products and                                      | I services   | 10.        | \$25.00          |
| 11. Medical and dental expens                                       | es   | 11.        | \$15.00          |
| 12. <b>Transportation.</b> Include gas, Do not include car payments | maintenance, bus or train fare.  | 12.        | \$200.00         |
| 13. Entertainment, clubs, recre                                     | ation, newspapers, magazines, and books                                    | 13.        | \$0.00           |
| 14. Charitable contributions ar                                     | d religious donations  | 14.        | \$0.00           |
| 15. <b>Insurance.</b> Do not include insurance dedu                 | acted from your pay or included in lines 4 or 20.                          |            |                  |
| 15a. Life insurance   |  | 15a        | \$0.00           |
| 15b. Health insurance   |  | 15b        | \$0.00           |
| 15c. Vehicle insurance  |  | 15c        | \$100.00         |
| 15d. Other insurance. Specify:                                      |  | 15d        | \$0.00           |
| 16. Taxes. Do not include taxes of                                  | deducted from your pay or included in lines 4 or 20.                       |            |                  |
| Specify:  |  | 16         | \$0.00           |
| 17. Installment or lease payme                                      | nts:   | 10         |                  |
| 17a. Car payments for Vehicle                                       |  | 17a        | \$294.00         |
| 17b. Car payments for Vehicle                                       | 2  | 17b        | \$0.00           |
| 17c. Other. Specify:  |  | 17c        | \$0.00           |
|   |  | 17d        | \$0.00           |
|   | maintenance, and support that you did not report as deducted from          |            | \$0.00           |
|   | e I, Your Income (Official Form 106I).                                     | 18.        |                  |
| , , ,   | o support others who do not live with you.                                 |            |                  |
| Specify:  | and included in the Aur Fofthir form on an Cabadrala I. Vorm Income        | 19.        | \$0.00           |
| 20. Other real property expense 20a. Mortgages on other prop        | s not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 200        | <b>\$0.00</b>    |
| 20b. Real estate taxes.   | ~·y  | 20a<br>20b | \$0.00<br>\$0.00 |
| 20c. Property, homeowner's,   | or renter's insurance  |            |                  |
| 20d. Maintenance, repair, and                                       |  | 20c        | \$0.00           |
| 20e. Homeowner's association  |  | 20d        | \$0.00           |
| 206. Homeowner 5 association  | i oi oonaominami aaco  | 20e        | \$0.00           |

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| Debtor 1   | Shakasha              |   | Orr                    | Case number (if known) |     |             |
|--|-----------------------|---|------------------------|------------------------|-----|-------------|
|  | First Name            | Middle Name   | Last Name              |                        |     |             |
| 21. <b>Othe</b>  | r. Specify:           |   |                        |                        | 21  | \$0.00      |
| 22 Colo  | ulate your monthly    | ovnonco   |                        |                        |     |             |
|  | •                     | •   |                        |                        |     | \$1,631.00  |
|  | Add lines 4 through 2 |   | Official Faces 400 L 0 |                        |     | \$0.00      |
|  |                       | y expenses for Debtor 2), if any                                      |                        |                        |     | \$1,631.00  |
| 22c. /   | Add line 22a and 22b  | . The result is your monthly exp                                      | enses.                 |                        | 22. |             |
| 23.Calcu   | ılate your monthly n  | et income.  |                        |                        |     |             |
| 23a. (   | Copy line 12 (your co | mbined monthly income) from   | Schedule I.            |                        | 23a | \$1,806.63  |
| 23b.   | Copy your monthly e   | xpenses from line 22 above.   |                        |                        | 23b | \$1,631.00  |
| 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. |                       |   |                        |                        |     | \$175.63    |
|  |                       |   |                        |                        | 23c | <del></del> |
| mort   |                       | ect to finish paying for your car<br>rease or decrease because of a n |                        |                        |     |             |
|  | LAPIGHT HOLE          |   |                        |                        |     |             |

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| Fill in this information to identify your case: |                           |             |                              |  |  |  |  |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1  | Shakasha                  |             | Orr                          |  |  |  |  |
|   | First Name                | Middle Name | Last Name                    |  |  |  |  |
| Debtor 2  |                           |             |                              |  |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |  |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois (State) |  |  |  |  |
| Case number                                     |                           |             | ()                           |  |  |  |  |

#### Official Form 106Dec

| П | Check if this is a | n |
|---|--------------------|---|
|   | amended filing     |   |

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |   |  |
|-----|--|---|--|
|     | Did you pay or agree to pay someone who is NOT an attorney to I                                  | help you fill out bankruptcy forms?   |  |
|     | ✓ No   |   |  |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |
|     |  |   |  |
|     |  |   |  |
|     | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and   |  |
| ×   | /s/ Shakasha Orr   | ×   |  |
|     | Signature of Debtor 1  | Signature of Debtor 2   |  |
|     | Date 3/2/2017  | Date  |  |
|     | MM/DD/YYYY   | MM/DD/YYYY  |  |

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|              |                      |                   |                        |  |                | _          |           |                                 |
|--------------|----------------------|-------------------|------------------------|--|----------------|------------|-----------|---------------------------------|
| Fill in this | s information to     | o identify your o | case:                  |  |                |            |           |                                 |
| Debtor 1     | Shakas               |                   | M' dalla Nia           | Orr  |                |            |           |                                 |
| Debtor 2     | First Na             | ame               | Middle Na              | me Last Nam  | е              |            |           |                                 |
| (Spouse, if  | filing) First Na     | ame               | Middle Na              | me Last Nam  | е              |            |           |                                 |
| United St    | tates Bankrupto      | cy Court for the: | Northern               | District of Illino                                 |                |            |           |                                 |
| Case nur     | mber                 |                   |                        | (Stat  | e)             |            |           |                                 |
| (If known)   |                      |                   |                        |  |                |            |           | _                               |
| Offic        | ial Forn             | n 107             |                        |  |                |            |           | Check if this is amended filing |
| State        | ment of              | Financia          | al Affairs fo          | r Individuals                                      | Filing fo      | r Bankru   | ıptcy     | 12/                             |
|              |                      |                   |                        | ried people are filing tate sheet to this form     |                |            |           |                                 |
| number       | (if known). A        | nswer every q     | uestion.               |  |                |            |           |                                 |
| Part 1:      | Give Details         | s About Your      | Marital Status a       | nd Where You Lived                                 | Before         |            |           |                                 |
| 1. Wł        | nat is vour cur      | rent marital st   | atus?                  |  |                |            |           |                                 |
|              |                      | rent maritar st   | atus.                  |  |                |            |           |                                 |
| L            | Married  Not married |                   |                        |  |                |            |           |                                 |
| ✓            | Not married          |                   |                        |  |                |            |           |                                 |
| 2. Du        | ring the last 3      | 3 years, have yo  | ou lived anywhere o    | other than where you liv                           | e now?         |            |           |                                 |
|              | No                   |                   |                        |  |                |            |           |                                 |
| ✓            | Yes. List all        | of the places yo  | ou lived in the last 3 | years. Do not include v                            | vhere you live | now.       |           |                                 |
|              |                      |                   |                        |  |                |            |           |                                 |
|              | Debtor 1:            |                   |                        | Dates Debtor 1 lived there                         | Debtor 2:      |            |           | Dates Debtor 2 lived there      |
|              |                      |                   |                        | there  |                |            |           | there                           |
|              |                      |                   |                        |  | Same a         | s Debtor 1 |           | Same as Debtor 1                |
|              | 10535 s. egg         |                   |                        | From 02/2014                                       |                |            |           | Erom                            |
|              | Number Stre          | et                |                        | From 02/2014<br>To 03/2015                         | Number Str     | eet        |           | From<br>To                      |
|              |                      |                   |                        | 03/2015  | -              |            |           |                                 |
|              | Chicago<br>City      | Illinois<br>State | 60628<br>Zip Code      |  | City           | State      | Zip Code  |                                 |
|              |                      |                   |                        |  | Same a         | s Debtor 1 |           | Same as Debtor 1                |
|              |                      |                   |                        |  | _              |            |           | _                               |
|              | Number Stre          | et                |                        | From   | Number Str     | eet        |           | From                            |
|              |                      |                   |                        | То   |                |            |           | То                              |
|              | Cit.                 | Otata             | 7:- Oada               |  | Oit.           | Otata      | 7:- O- d- |                                 |
|              | City                 | State             | Zip Code               |  | City           | State      | Zip Code  |                                 |
|              |                      |                   |                        | use or legal equivalent<br>na, Nevada, New Mexico, |                |            |           | Community property states<br>.) |
|              |                      | •                 |                        |  | •              | 5          |           |                                 |
| <b>~</b>     | No                   |                   |                        |  |                |            |           |                                 |

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| Deb  | tor 1                              | Shakasha   | Orr   |  | umber (if known)                                       |  |
|------|------------------------------------|--|---|--|--|--|
|      |                                    | First Name Middle  | e Name Last Nar   | me   |  |  |
| Part | 2:                                 | Explain the Sources of Your Inc  | come  |  |  |  |
| 4.   | Fill i                             | you have any income from employm<br>in the total amount of income you receiv<br>vities. If you are filing a joint case and you<br>No<br>Yes. Fill in the details.  | ved from all jobs and all busi  | nesses, including part-time  |  | ars?   |
|      |                                    |  | Debtor 1  |  | Debtor 2   |  |
|      |                                    |  | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)                                      | Sources of income<br>Check all that apply.             | Gross income<br>(before deductions and<br>exclusions)            |
|      |                                    | om January 1 of current year until<br>e date you filed for bankruptcy:   | ✓ Wages, commissions, bonuses, tips  Operating a business                                 | \$3000.00  | Wages, commissions, bonuses, tips Operating a business |  |
|      |                                    | or last calendar year: anuary 1 to December 31,  | ✓ Wages, commissions, bonuses, tips  Operating a business                                 | \$20000.00   | Wages, commissions, bonuses, tips Operating a business |  |
|      |                                    | or the calendar year before that:<br>anuary 1 to December 31,  | ✓ Wages, commissions, bonuses, tips  Operating a business                                 | \$20000.00   | Wages, commissions, bonuses, tips Operating a business |  |
|      | Inclu<br>publi<br>filing<br>List ( | you receive any other income during de income regardless of whether that ir ic benefit payments; pensions; rental inca joint case and you have income that each source and the gross income from No  Yes. Fill in the details. | ncome is taxable. Examples of come; interest; dividends; m you received together, list it | of other income are alimony;<br>oney collected from lawsuits;<br>only once under Debtor 1. | royalties; and gambling and lo                         |  |
|      |                                    |  | Debtor 1  |  | Debtor 2   |  |
|      |                                    |  | Sources of income<br>Describe below.  | Gross income from each source (before deductions and exclusions)                           | Sources of income<br>Describe below.                   | Gross income from each source (before deductions and exclusions) |
|      |                                    | rom January 1 of current year until<br>ne date you filed for bankruptcy:   | Est. Link   | \$22.00  |  |  |
|      |                                    | or last calendar year:<br>lanuary 1 to December 31, 2016 )   | Est. Link   | \$6,000.00   |  |  |
|      |                                    | or the calendar year before that:<br>lanuary 1 to December 31, 2015 )<br>YYYY  | Est. Link   | \$6,000.00   |  |  |
|      |                                    |  |   |  |  |  |

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Debtor 1 Shakasha Orr Case number (if known) Middle Name Last Name First Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors

Other

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| r 1               | Shakasha                               |  |  | Or  | r  | Case number                                 | (if known)   |
|-------------------|--|--|--|---|--|---|--|
|                   | First Name                             |  | Middle Name  | Las                                       | st Name                                      |   |  |
| nsi<br>orp<br>ige | ders include your<br>porations of whic | relatives; and the relatives; ar | any general partners<br>an officer, director,<br>ness you operate as | s; relatives of any<br>person in control, | general partners; part<br>or owner of 20% or | nerships of which y<br>more of their voting | who was an insider? ou are a general partner; securities; and any managing domestic support obligations, |
| <b>✓</b>          | No                                     |  |  |   |  |   |  |
|                   | Yes. List all pay                      | ments to   | an insider.  | <b>D</b>                                  |  |   |  |
|                   |  |  |  | Dates of payment                          | Total amount paid                            | Amount you still owe                        | Reason for this payment  |
|                   | Insider's Name                         |  |  |   |  |   |  |
|                   | Number Street                          |  |  |   |  |   |  |
|                   | City                                   | State  | Zip Code   |   |  |   |  |
|                   | Insider's Name                         |  |  |   |  |   |  |
|                   | Number Street                          |  |  |   |  |   |  |
|                   |  |  |  |   |  |   |  |
|                   | City                                   | State  | Zip Code   |   |  |   |  |
|                   | No                                     | _  | aranteed or cosigne  | -   | Total amount paid                            | Amount you still owe                        | Reason for this payment  Include creditor's name   |
|                   | Insider's Name                         |  |  |   |  |   |  |
|                   |  |  |  |   |  |   |  |
|                   | Number Street                          |  |  |   |  |   |  |
| _                 | Number Street  City                    | State  | Zip Code   |   |  |   |  |
| _                 |  | State  | Zip Code   |   |  |   |  |
| _                 | City                                   | State  | Zip Code   |   |  |   |  |
| _                 | City Insider's Name                    | State  | Zip Code   |   |  |   |  |

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Debtor 1 Shakasha Orr Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title **Debt Collection** Cook County Circuit Court Pending Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 17M1102978 Illinois 60602 Chicago City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Shakasha   | Orr                       | Case number (if known)                         |                     |
|------|--|---------------------------|--|---------------------|
|      | First Name Middle Name   | Last Name                 |  |                     |
| 11.  | Within 90 days before you filed for bankruptcy, did a accounts or refuse to make a payment because you No  |                           | bank or financial institution, set off any amo | unts from your      |
|      |  |                           |  |                     |
|      | Yes. Fill in the details.  |                           |  |                     |
|      |  | Describe the action to    | ne creditor took  Date action was taken        | Amount              |
|      | Creditor's Name  |                           |  |                     |
|      | Number Street  |                           |  |                     |
|      |  | Last 4 digits of account  | number: XXXX-                                  |                     |
|      | City State Zip Code  |                           |  |                     |
| 12.  | Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official? |                           | possession of an assignee for the benefit of   | creditors, a court- |
|      | <b>☑</b> No  |                           |  |                     |
|      | Yes  |                           |  |                     |
| Part | 5: List Certain Gifts and Contributions  |                           |  |                     |
|      |  |                           |  |                     |
| 13.  | Within 2 years before you filed for bankruptcy, did  | you give any gifts with a | total value of more than \$600 per person?     |                     |
|      | ✓ No  Yes. Fill in the details for each gift.  |                           |  |                     |
|      | Gifts with a total value of more than \$600 per person   | Describe the gifts        | Dates you<br>gave the<br>gifts                 | Value               |
|      |  |                           |  |                     |
|      | Person to Whom You Gave the Gift   |                           |  |                     |
|      | Number Street  |                           |  |                     |
|      | City State Zip Code  |                           |  |                     |
|      | Person's relationship to you   |                           |  |                     |
|      |  |                           |  |                     |
|      | Person to Whom You Gave the Gift   |                           |  |                     |
|      | Number Street  |                           |  |                     |
|      | City State Zip Code  |                           |  |                     |
|      | Person's relationship to you   |                           |  |                     |

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| eptor i  | Shakasha   | Orr  | Case number (if know         | n)                                |                        |
|----------|--|--|------------------------------|-----------------------------------|------------------------|
|          | First Name Middle Nar  | me Last Name   |                              |                                   |                        |
|          |  |  |                              |                                   |                        |
| . Wit    | thin 2 years before you filed for bankrup  | tcy, did you give any gifts or contribu  | tions with a total value o   | of more than \$600                | to any charity?        |
|          | 1 No   |  |                              |                                   |                        |
| ✓        | ı  |  |                              |                                   |                        |
|          | Yes. Fill in the details for each gift or co   | ontribution.   |                              |                                   |                        |
|          | Gifts or contributions to charities  | Describe what you contri   | buted                        | Date you                          | Value                  |
|          | that total more than \$600   | 200020 ,02 00  |                              | contributed                       |                        |
|          | •  |  |                              |                                   |                        |
|          |  |  |                              |                                   |                        |
|          | Charity's Name   |  |                              |                                   |                        |
|          |  |  |                              |                                   |                        |
|          |  |  |                              |                                   |                        |
|          | Number Street  |  |                              |                                   |                        |
|          |  |  |                              |                                   |                        |
|          | City State Zip Co  | ode  |                              |                                   |                        |
|          |  |  |                              |                                   |                        |
| rt 6:    | List Certain Losses  |  |                              |                                   |                        |
| gar<br>✓ | mbling? No Yes. Fill in the details.   |  |                              |                                   |                        |
|          | Describe the property you lost and how the loss occurred   | Describe any insurance of<br>Include the amount that insurance claims of<br>pending insurance claims of<br>the contract of the contr | surance has paid. List       | Date of your loss                 | Value of property lost |
|          |  | A/B: Property.   |                              |                                   |                        |
|          |  |  |                              |                                   |                        |
|          |  |  |                              |                                   |                        |
| rt 7·    | List Certain Payments or Transfer  | re   |                              |                                   |                        |
| abo      | thin 1 year before you filed for bankrupt<br>out seeking bankruptcy or preparing a b   | cy, did you or anyone else acting on y<br>pankruptcy petition?   |                              |                                   | anyone you consulte    |
| abo      | thin 1 year before you filed for bankrupt  | cy, did you or anyone else acting on y<br>pankruptcy petition?   |                              |                                   | anyone you consulte    |
| abo      | thin 1 year before you filed for bankrupto<br>out seeking bankruptcy or preparing a b<br>lude any attorneys, bankruptcy petition pre   | cy, did you or anyone else acting on y<br>pankruptcy petition?   |                              |                                   | anyone you consulte    |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition pre   | cy, did you or anyone else acting on y<br>pankruptcy petition?<br>parers, or credit counseling agencies for  | services required in your ba | ankruptcy.                        |                        |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition pre   | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for Description and value of a  | services required in your ba | ankruptcy.  Date payment          | Amount of              |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition pre   | cy, did you or anyone else acting on y<br>pankruptcy petition?<br>parers, or credit counseling agencies for  | services required in your ba | Date payment or transfer          |                        |
| abo      | thin 1 year before you filed for bankruptoout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition prepared No  Yes. Fill in the details.   | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for  Description and value of a transferred   | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition preports.  No Yes. Fill in the details.  Semrad Law Firm  | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for Description and value of a  | services required in your ba | Date payment or transfer          | Amount of              |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition preport No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid  | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for  Description and value of a transferred   | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition preport No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street   | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for  Description and value of a transferred   | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition preport No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid  | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for  Description and value of a transferred   | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition preport No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street   | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for  Description and value of a transferred   | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition preport No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor  | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for the counselin       | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition preport No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6060  | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for the counseling agencies agencies for the counseling agencies for the counseling agencies for the counseling agencies agencies agencies for the counseling agencies agencies for the counseling agencies a       | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition preport No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor  | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for the counseling agencies agencies for the counseling agencies for the counseling agencies for the counseling agencies agencies agencies for the counseling agencies agencies for the counseling agencies a       | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition prepared No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6060 City State Zip Co  | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for the counseling agencies agencies for the counseling agencies for the counseling agencies for the counseling agencies agencies agencies for the counseling agencies agencies for the counseling agencies a       | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition preport No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6060  | cy, did you or anyone else acting on younkruptcy petition? parers, or credit counseling agencies for the counseling agencies agencies for the counseling agencies for the counseling agencies for the counseling agencies agencies agencies for the counseling agencies agencies for the counseling agencies a       | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition prepared in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6060 City State Zip Co   | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankruptout seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition prepared No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6060 City State Zip Co  | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition prepared by the seeking bankru | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition prepared in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6060 City State Zip Co   | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition prepared to the pre | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition prepared by the seeking bankru | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition prepared to the pre | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition prepared to the pre | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition prepared by the seeking bankru | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a belude any attorneys, bankruptcy petition prepared to the pre | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a bankruptcy or preparing a bankruptcy petition prepared any attorneys, bankruptcy petition prepared by the seeking ban | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |
| abo      | thin 1 year before you filed for bankrupto out seeking bankruptcy or preparing a ballude any attorneys, bankruptcy petition prepared by the seeking bankru | Description and value of a transferred  Attorney's Fee - 400.00  | services required in your ba | Date payment or transfer was made | Amount of payment      |

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| Debto | or 1 Shakasha   | Orr   | Case number (if known)   |                              |
|-------|---|---|--|------------------------------|
|       | First Name Middle Name  | Last Name   |  |                              |
| ŀ     | Within 1 year before you filed for bankruptcy, d<br>help you deal with your creditors or to make pa<br>Do not include any payment or transfer that you list                                 | syments to your creditors?                        | behalf pay or transfer any property to anyo                                | one who promised to          |
| ]     | No Yes. Fill in the details.  |   |  |                              |
|       |   | Description and value of any                      | property Date A  | mount of payment             |
|       |   | transferred                                       | payment or<br>transfer was<br>made   |                              |
|       | Person Who Was Paid   |   |  |                              |
|       | Number Street   | _   |  |                              |
|       |   | _   |  |                              |
|       | City State Zip Code   |   |  |                              |
| - 1   | the ordinary course of your business or financial Include both outright transfers and transfers made and transfers that you have already listed on this stated No Yes. Fill in the details. | as security (such as the granting of a se-        | curity interest or mortgage on your property).                             | Do not include gifts         |
| •     | _   | Description and value of any property transferred | Describe any property or<br>payments received or debts paid<br>in exchange | Date<br>transfer was<br>made |
|       | Person Who Received Transfer  | _   |  |                              |
|       | Number Street   | _   |  |                              |
|       | City State Zip Code<br>Person's relationship to you   |   |  |                              |
|       | Person Who Received Transfer  | _   |  |                              |
|       | Number Street   | _   |  |                              |
|       | City State Zip Code<br>Person's relationship to you   |   |  |                              |
| ŀ     | Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protection devices.)  | , did you transfer any property to a se           | elf-settled trust or similar device of which                               | you are a                    |
| [     | ✓ No  Yes. Fill in the details.   |   |  |                              |
| •     |   | Description and value of the                      | property transferred   | Date<br>transfer was<br>made |
|       | Name of trust   |   |  |                              |

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Debtor 1 Shakasha Orr Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred Bank of America Checking XXXX-1245 09/2016 \$ 0.00 Person Who Was Paid Savings P.O. Box 25118 Number Street Money market Brokerage Florida 33622 Tampa Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Number Street

City

State

State

Zip Code

City

Zip Code

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Debtor 1 Shakasha Case number (if known) Middle Name First Name Identify Property You Hold or Control for Someone Else Part 9: 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb  |       | Shakasha                   |                  |                    |               | rr              | Cas                | e number (ii  | fknown)        |                 |                                  |
|------|-------|----------------------------|------------------|--------------------|---------------|-----------------|--------------------|---------------|----------------|-----------------|----------------------------------|
|      |       | First Name                 |                  | Middle Name        | Lá            | ast Name        |                    |               |                |                 |                                  |
| 26.  |       | e you been a part          | y in any judic   | cial or administ   | rative proce  | eeding under    | any environmen     | ntal law? In  | clude settler  | ments and ord   | lers.                            |
|      |       | No<br>Yes. Fill in the det | taile            |                    |               |                 |                    |               |                |                 |                                  |
|      | Ш     | 165. 1                     | ialis.           |                    | Court or or   | ·onov           |                    | Moturo        | of the case    |                 | Status of the                    |
|      |       |                            |                  |                    | Court or a    | jency           |                    | Nature        | or the case    |                 | Status of the case               |
|      |       | Case title                 |                  |                    |               |                 |                    |               |                |                 | <b>—</b> » "                     |
|      |       | -                          |                  |                    | Court Name    | 9               |                    |               |                |                 | Pending                          |
|      |       |                            |                  |                    |               |                 |                    |               |                |                 | On appeal                        |
|      |       | Case number                |                  |                    | NumberStre    | eet             |                    |               |                |                 | Concluded                        |
|      |       |                            |                  |                    | City          | State           | Zip Code           |               |                |                 | Concluded                        |
|      |       | Ī                          |                  |                    |               |                 | •                  |               |                |                 |                                  |
| Part | t 11: | Give Details Al            | oout Your E      | Business or Co     | onnection     | s to Any Bu     | siness             |               |                |                 |                                  |
| 27.  | With  | nin 4 years before         | vou filed for    | bankruptev. die    | d vou own a   | business or     | have any of the    | followina c   | onnections t   | o anv busines   | s?                               |
|      | ••••• | -                          |                  |                    |               |                 | -                  | _             |                | o uny buomoo    |                                  |
|      |       |                            |                  |                    |               |                 | activity, either f | ull-time or p | oart-time      |                 |                                  |
|      |       | A member of                | f a limited liab | oility company (I  | _LC) or limit | ed liability pa | artnership (LLP)   |               |                |                 |                                  |
|      |       | A partner in a             | a partnership    | )                  |               |                 |                    |               |                |                 |                                  |
|      |       | An officer, di             | rector, or ma    | ınaging executiv   | e of a corp   | oration         |                    |               |                |                 |                                  |
|      |       | An owner of                | at least 5% c    | of the voting or e | equity secur  | ities of a corp | ooration           |               |                |                 |                                  |
|      |       | No None of the c           | shava applia     | o Co to Port 10    |               |                 |                    |               |                |                 |                                  |
|      | 뇓     | No. None of the a          |                  |                    |               | ou for each h   | v voinooo          |               |                |                 |                                  |
|      | Ш     | Yes. Check all that        | атарріу аро      | ve and illi in the |               |                 |                    |               |                |                 |                                  |
|      |       |                            |                  |                    | Desc          | ribe the natu   | re of the busine   | SS            |                |                 | number Do not<br>number or ITIN. |
|      |       |                            |                  |                    |               |                 |                    |               |                |                 |                                  |
|      |       | Business Name              |                  |                    | _             |                 |                    |               | EIN:           |                 |                                  |
|      |       |                            |                  |                    | _             |                 |                    |               | D. L. L. L.    |                 |                                  |
|      |       | Number Street              |                  |                    | Nam           | e of account:   | ant or bookkeep    | er            | Dates busi     | ness existed    |                                  |
|      |       | City                       | State            | Zip Code           |               | o or account    | unt of bookkeep    |               | From           | To              |                                  |
|      |       | Oity                       | Oldio            | 2.0 0000           |               |                 |                    |               | F10111         | 10              |                                  |
|      |       |                            |                  |                    |               |                 |                    |               |                |                 |                                  |
|      |       |                            |                  |                    |               |                 |                    |               |                |                 |                                  |
|      |       |                            |                  |                    | Desc          | ribe the natu   | ıre of the busine  | ss            |                |                 | number Do not                    |
|      |       |                            |                  |                    |               |                 |                    |               | include So     | cial Security i | number or ITIN.                  |
|      |       | Business Name              |                  |                    | _             |                 |                    |               | EIN:           |                 |                                  |
|      |       | 240000 . 140               |                  |                    |               |                 |                    |               |                |                 |                                  |
|      |       | Number Street              |                  |                    |               |                 |                    |               | Dates busi     | ness existed    |                                  |
|      |       |                            |                  |                    | Nam           | e of account    | ant or bookkeep    | er            |                |                 |                                  |
|      |       | City                       | State            | Zip Code           |               |                 |                    |               | From           | To              |                                  |
|      |       |                            |                  |                    |               |                 |                    |               |                |                 |                                  |
|      |       |                            |                  |                    |               |                 |                    |               |                |                 |                                  |
|      |       |                            |                  |                    | Dono          | ribo tha nati   | ura of the busine  | .00           | Employer I     | Idontification  | number De not                    |
|      |       |                            |                  |                    | Desc          | ribe the hatt   | ire of the busine  | :55           |                |                 | number Do not<br>number or ITIN. |
|      |       |                            |                  |                    |               |                 |                    |               | EIN:           |                 |                                  |
|      |       | Business Name              |                  |                    | _             |                 |                    |               | ∟11 <b>V</b> . |                 |                                  |
|      |       | Number Oliver              |                  |                    | _             |                 |                    |               | Datas bu-      | noce ovictor    |                                  |
|      |       | Number Street              |                  |                    | Nam           | e of accounts   | ant or bookkeep    | er            | Dates Dusi     | ness existed    |                                  |
|      |       | City                       | State            | Zip Code           |               | o. account      |                    |               | Erom           | To              |                                  |
|      |       | J.,                        | Olato            | -ip code           |               |                 |                    |               | F10111         | To              |                                  |
|      |       |                            |                  |                    |               |                 |                    |               |                |                 |                                  |
|      |       |                            |                  |                    |               |                 |                    |               |                |                 |                                  |

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| Debt   | tor 1 Shakash                | a                                     |                            | Orr                          | Case number (if known)   |
|--------|------------------------------|---------------------------------------|----------------------------|------------------------------|--|
|        | First Nam                    | Э                                     | Middle Name                | Last Name                    |  |
| 28.    | creditors, o                 | ars before you fi<br>r other parties. | led for bankruptcy, did yo | u give a financial stateme   | ent to anyone about your business? Include all financial institutions,   |
|        | ✓ No  Yes. Fil               | I in the details be                   | elow.                      |                              |  |
|        |                              |                                       |                            | Date issued                  |  |
|        | Name                         |                                       |                            | MM/DD/YYYY                   |  |
|        | Numb                         | er Street                             |                            | -                            |  |
|        | City                         | Sta                                   | te Zip Code                | -                            |  |
| Part   | 12: Sign I                   | Below                                 |                            |                              |  |
| t      | rue and corr<br>a bankruptcy | ect. I understan<br>case can result   | d that making a false stat | tement, concealing prope     | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|        | •                            | /s/ Shaka                             |                            |                              | *  |
|        |                              | Signature of                          | Debtor 1                   |                              | Signature of Debtor 2  |
|        |                              | Date 3/2/20                           | 17                         |                              | Date   |
|        | Did you attac                | h additional pag                      | ges to Your Statement of   | Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)?   |
| [<br>[ | ✓ No<br>Yes                  |                                       |                            |                              |  |
|        | Did you pay o                | r agree to pay s                      | omeone who is not an att   | orney to help you fill out   | bankruptcy forms?  |
| Į į    | <b>√</b> No                  |                                       |                            |                              |  |
| Ì      | Yes. Nam                     | e of person                           |                            |                              | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).   |

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

| Prior to the filing of this statement I have received  Balance Due  2. The source of the compensation paid to me was:    Debtor  |       |   | North              | ern District of Illinois         |                   |                              |
|--|-------|---|--------------------|----------------------------------|-------------------|------------------------------|
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR  1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filling of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept  94,000.00  Prior to the filling of this statement I have received  83,000.00  83,600.00  2. The source of the compensation paid to me was:    Debtor   | In re | Shakasha Orr  |                    | (                                | Case No.          |                              |
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR  1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept  \$4,000.  Prior to the filing of this statement I have received  \$34,000.  \$34,000.  Balance Due  2. The source of the compensation paid to me was:    Debtor   |       | Debtor  |                    |                                  |                   | ,                            |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept  S4,000.7  Prior to the filing of this statement I have received  Balance Due  S3,600.7  2. The source of the compensation paid to me was:  Debtor  Other (specify)  3. The source of the compensation paid to me is:  Debtor  Other (specify)  4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  The appear of the compensation, is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;  c. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: |       |   |                    | (                                | Chapter           | Chapter 13                   |
| compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept  94,000.  8400.0  Balance Due  2. The source of the compensation paid to me was:    Debtor   |       | DISCLOSURE OF   | COMPEN             | SATION OF ATTO                   | DRNEY F           | OR DEBTOR                    |
| Prior to the filing of this statement I have received  Balance Due  2. The source of the compensation paid to me was:    Debtor  | 1.    | compensation paid to me within one                    | year before the f  | ling of the petition in bankrup  | tcy, or agreed to | be paid to me, for services  |
| 2. The source of the compensation paid to me was:    Debtor  |       | For legal services, I have agreed to a                | ccept              |                                  |                   | \$4,000.00                   |
| 2. The source of the compensation paid to me was:    Debtor  |       | Prior to the filing of this statement I               | have received      |                                  |                   | \$400.00                     |
| 3. The source of the compensation paid to me is:    Debtor   |       | Balance Due   |                    |                                  |                   | \$3,600.00                   |
| 3. The source of the compensation paid to me is:    Debtor   | 2.    | The source of the compensation pai                    | d to me was:       |                                  |                   |                              |
| Debtor   |       | <b>✓</b> Debtor                                       | Oth                | er (specify)                     |                   |                              |
| 4.   | 3.    | The source of the compensation pai                    | d to me is:        |                                  |                   |                              |
| I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  //s/ Corey Walters  Signature of Attomey  Semrad Law Firm  |       | <b>✓</b> Debtor                                       | Oth                | er (specify)                     |                   |                              |
| members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filling of any petition, schedules, statements of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  3/2/2017  /s/ Corey Walters  Signature of Attorney  Semrad Law Firm  | 4.    |   |                    | mpensation with any other pe     | rson unless the   | y are                        |
| a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filling of any petition, schedules, statements of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  3/2/2017  /s/ Corey Walters  Date  Signature of Attorney  Semrad Law Firm  |       | members or associates of my la                        | w firm. A copy of  | he agreement, together with a    |                   |                              |
| c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  3/2/2017  /s/ Corey Walters  Date  Signature of Attorney  Semrad Law Firm  | 5.    | <ul> <li>a. Analysis of the debtor's final</li> </ul> |                    |                                  |                   |                              |
| d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  3/2/2017  /s/ Corey Walters  Date  Signature of Attorney  Semrad Law Firm   |       | b. Preparation and filing of any                      | petition, schedule | es, statements of affairs and pl | an which may b    | pe required;                 |
| CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.    3/2/2017  |       | c. Representation of the debtor                       | at the meeting of  | creditors and confirmation he    | aring, and any a  | adjourned hearings thereof;  |
| CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.     3/2/2017   |       | d. Representation of the debtor                       | in adversary prod  | eedings and other contested b    | oankruptcy mat    | ters;                        |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.    3/2/2017   | 6.    | By agreement with the debtor(s), the                  | above-disclosed    | fee does not include the follow  | ving services:    |                              |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.    3/2/2017   |       |   |                    |                                  |                   |                              |
| debtor(s) in this bankruptcy proceedings.  3/2/2017 /s/ Corey Walters  Date Signature of Attorney  Semrad Law Firm   |       |   |                    | CERTIFICATION                    |                   |                              |
| Date Signature of Attorney  Semrad Law Firm  |       |   | te statement of ar | y agreement or arrangement fo    | or payment to n   | ne for representation of the |
| Semrad Law Firm  |       | 3/2/2017  |                    | /s/ Corey                        | Walters           |                              |
|  |       |   | _                  |                                  |                   |                              |
|  |       |   |                    | Semrad L                         | .aw Firm          |                              |
| Name of law firm   |       |   | -                  |                                  |                   | _                            |

B2030 (Form 2030) (12/15)

### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

|             | Shakasha C  | 711  | Case No.   |  |
|-------------|---|--|--|--|
|             | Debtor  |  | Ob serter.   | (If known)   |
|             |   |  | Chapter  | Chapter 13   |
|             | DISCLOSURE (  | OF COMPENSATION  | OF ATTORNEY F  | OR DEBTOR  |
| 1.          | compensation paid to the with   | and Fed. Bankr. P. 2016(b), I certify on one year before the filing of the percental of the debtor(s) in contemplation | tition in hankruntov, or agreed t                                      | a ha poid to ma/for convices   |
|             | For legal services, I have agreed   |  |  | \$4,000.0  |
|             | Prior to the filing of this statem  | ent I have received  |  | \$400.0  |
|             | Balance Due   |  |  | \$3,600.0  |
| 2.          | The source of the compensatio   | n paid to me was:  |  |  |
|             | <b>Debtor</b>   | Other (specify)  |  |  |
| 3.          | The source of the compensatio   | n paid to me is:   |  | N TO THE CONTROL OF T |
|             | <b>Debtor</b>   | Other (specify)  |  |  |
| 4.          | I have not agreed to share to members and associates of                                   | the above-disclosed compensation was firm.   | vith any other person unless the                                       | y are  |
|             | I have agreed to share the a<br>members or associates of r<br>the people sharing in the o | above-disclosed compensation with a<br>my law firm. A copy of the agreement,<br>ompensation, is attached.              | a other person or persons who a<br>, together with a list of the name  | ere not<br>es of   |
| 5.          | In return for the above-disclose<br>a. Analysis of the debtor's<br>bankruptcy;            | d fee, I have agreed to render legal se<br>financial situation, and rendering ad                                       | ervice for all aspects of the bank<br>vice to the debtor in determinin | ruptcy case, including:<br>g whether to file a petition in   |
|             | b. Preparation and filing of  | any petition, schedules, statements  | of affairs and plan which may b  | e required;  |
|             | c. Representation of the de   | ebtor at the meeting of creditors and  | confirmation hearing, and any a  | adjourned hearings thereof;  |
|             |   | ebtor in adversary proceedings and o   |  |  |
| 6.          | By agreement with the debtor(s)   | , the above-disclosed fee does not ir  | nclude the following services:   |  |
|             |   |  |  |  |
| ··········· |   | CERTIFICATI  | ON   |  |
| l c<br>bto  | ertify that the foregoing is a cor<br>r(s) in this bankruptcy proceeding                  | mplete statement of any agreement o<br>ngs.  | r arrangement for payment to m   | ne for representation of the   |
|             | 3/2/2017  |  | /s/ Corey Walters  |  |
|             | Date  |  | Signature of Attorney  |  |
|             |   |  | Semrad Law Firm  |  |
|             |   |  | Name of law firm   |  |

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

#### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to  $\S$  1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to  $\S$  726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

8.0.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3,600.00; and \$61.76 for expenses, leaving a balance due of \$3,971.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 3/2/2017   |                        |
|------------------|------------------------|
| Signed:          | $\wedge$               |
| /s/ Shakasha Orr | <u> </u>               |
| Shaleisha Owo    | /s/ Corey Walters      |
| Debtor(s)        | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$275 | total fee          |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$200 | filing fee         |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Orr, Shakasha | Case No   |                                      |
|-----------------|---------------|---|--------------------------------------|
|                 | Debtor(s)     |   |                                      |
|                 |               | Chapter.  | Chapter13                            |
|                 | VERIFIC       | CATION OF CREDITOR MAT                                | ΓRIX                                 |
| Th<br>knowledge |               | y that the attached list of creditors is to           | rue and correct to the best of their |
| Date:           | 3/2/2017      | /s/ Orr, Shakash<br>Orr, Shakasha<br>Signature of Del |                                      |

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Navient PO BOX 9500 WILKES BARRE, PA, 18773

PRESTIGE FINANCIAL SVC 1420 S 500 W SALT LAKE CITY, UT, 84115

Law Office of Michael J. Torchalski 820 E. Terra Cotta Avenue Suite 207 Crystal Lake, IL, 60014

SECURITY AUTO LOANS IN 4900 HIGHWAY 169 N STE 2 NEW HOPE, MN, 55428

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK, VA, 23502

MED BUSI BUR 1460 RENAISSANCE D SUITE 400 PARK RIDGE, IL, 60068

CHOICE RECOVERY 1550 Old Henderson Road, Suite S100 Columbus, OH, 43220

RPM Investors LLC 120 W MADISON ST#701 c/o Jerome D. Citron, Attorney at Law Chicago, IL, 60602

City of Chicago Parking Tickets 333 South State Street, Rm 540 Chicago, IL, 60604

Harris & Harris LTD 111 West Jackson Boulevard Suite 400 Chicago, IL, 60604

Peoples Gas Light & Coke Co. 200 E. Randolph St. Chicago, IL, 60601 Commonwealth Edison 3 Lincoln Ctr Attn: Bankruptcy Department Oakbrook Ter, IL, 60181

Comcast Cable c/o Xfinity PO Box 2127 Austell, GA, 30168

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| Debtor 1 Shakasha<br>First Name   |  | <u>)rr                                   </u>  | nown)   |  |  |  |
|---|--|--|---|--|--|--|
| Paid is Answer These Qu   | Parts: Answer These Questions for Reporting Purposes   |  |   |  |  |  |
| 16. What kind of debts do you have?   | 16a. Are your debts primarily of "incurred by an individual processing of the second o | consumer debts? Consumer debts are primarily for a personal, family, or hou pusiness debts? Business debts are divestment or through the operation of a owe that are not consumer debts or the operation of the op | sehold purpose."  febts that you incurred to obtain the business or investment.                             |  |  |  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No.  | ter 7. Go to line 18.  7. Do you estimate that after any exempt p nds will be available to distribute to unsect  | property is excluded and administrative ured creditors?   |  |  |  |
| 18. How many creditors<br>do you estimate that<br>you owe?  | ☑ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999  | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000  |  |  |  |
| 19. How much do you<br>estimate your assets<br>to be worth?   | S0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |  |  |  |
| 20. How much do you estimate your liabilities to be?  | \$50,850,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |  |  |  |
|   | I have examined this petition, and   | I declare under penalty of perjury that  | the information provided in true and  |  |  |  |
|   | If I have chosen to file under Chap  |  | feligible under Chenter 7, 11, 10, au 10  |  |  |  |
|   | I request relief in accordance with<br>I understand making a false statem  | did not pay or agree to pay someone of and read the notice required by 11 U the chapter of title 11, United States (nent, concealing property, or obtaining can result in fines up to \$250,000, or 19, and 3571.  | U.S.C. § 342(b). Code, specified in this petition.  |  |  |  |
|   | *  | Signature of Executed of   | No.   |  |  |  |

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| Fill in this information to identify your case:   |   |
|---|---|
| Debtor 1 Shakasha First Name Middle Name Debtor 2   | Orr<br>Last Name  |
| (Spouse, If filing) First Name Middle Name  | Last Name   |
| United States Bankruptcy Court for the: Northern Dis  | trict of Illinois   |
| Case number (If known)  | (State)   |
| Official Form 106Dec  | Check if this is a amended filing   |
| Declaration About an Individual Debtor'   | s Schedules 12/1  |
| If two married people are filing together, both are equally responsible   | e for supplying correct information.  |
| U.S.C. §§ 152, 1341, 1519, and 3571.  Partell Sign Below  | nended schedules. Making a false statement, concealing property, or obtaining<br>n result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 |
| Did you pay or agree to pay someone who is NOT an attorney to  No  Yes. Name of person                                | help you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).                                  |
| Under penalty of perjury, I declare that I have read the summary that they are true and correct.   * /s/ Shakasha Orr | <b>x</b>  |
| Date 3/2/2017<br>MM/DD/YYYY   | Signature of Debtor 2  Date  MM/DD/YYYY   |

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| Debt | or 1 Shakasha<br>First Name                          |   | Orr                        | Case number @k                                  | nown)  |   |
|------|--|---|----------------------------|---|--|---|
|      |  | Middle Name   | Last Name                  |   |  |   |
| 28.  | Within 2 years before you creditors, or other partie | ı filed for bankruptcy, did y<br>s,   | ou give a financial statem | ent to anyone about you                         | ır business? İnc   | clude all financial institutions  |
|      | No Yes. Fill in the details                          | below.  |                            |   | The second secon |   |
|      |  |   | Date issued                |   |  |   |
|      | Name   |   | MM/DD/YYYY                 | •   |  |   |
|      | Number Street  |   | <del></del>                |   |  |   |
|      | City   | State Zip Code  | ****                       |   | ***************************************  |   |
| Part | Sign Below   |   |                            |   |  |   |
|      | pankruptcy case can resi                             | this Statement of Financia<br>and that making a false sta<br>ult in fines up to \$250,000,<br>washa Orr | or imprisonment for up to  |   |  |   |
|      | Signature of   | Debtor 1  |                            | Signature of Debtor                             | r 2  | TOTAL |
|      | Date 3/2/  | 2017  |                            | Date  |  |   |
| Z    | No<br>Yes  | ages to Your Statement of   |                            |   | cy (Official For   | m 107)?   |
|      | Yes. Name of person                                  |   |                            | Attach the <i>Bankn</i> .<br>Declaration, and 3 | iptcy Petition Pre<br>Signature (Officia   | eparer's Notice,<br>  Form 119\   |

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## UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| In re:          | Orr, Shakasha |  | ****                             |
|-----------------|---------------|--|----------------------------------|
|                 | Debtor(s)     | Case No.   |                                  |
|                 |               |  |                                  |
|                 |               | Chapter.   | Chapter13                        |
|                 | V             | RIFICATION OF CREDITOR MATR                          | IX                               |
| Ti<br>knowledge |               | y verify that the attached list of creditors is true | and correct to the best of their |
|                 |               |  |                                  |
| Date:           | 3/2/2017      | /s/ Orr, Shakasha                                    | Aboutable Ora                    |
|                 | ٠             | Orr, Shakasha<br>Signature of Debtor                 |                                  |

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| Deb            | otor 1 Shakasha Orr Case number (if known)  |  |
|----------------|---|--|
| nerMannier (er | All Colle Name Last Name  |  |
| 16.            | the meant taking meeting that applies to you. Follow these steps:   | - September 19 (September 1999) - September 19 (September 1999) - September 19 (September 1999)  |
|                | 16a. Fill in the state in which you live.   |  |
|                | 16b. Fill in the number of people in your household.  |  |
|                | 16c. Fill in the median family income for your state and size of household  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.                                    | \$75,454.00  |
| 17.            | How do the lines compare?   |  |
|                | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).   |  |
|                | 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. |  |
|                | Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)  |  |
|                | Copy your total average monthly income from line 11.  | \$2,364.55   |
| 19.            | Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.   |  |
|                | 19a. If the marital adjustment does not apply, fill in 0 on line 19a.   | -\$0.00  |
|                | 19b. Subtract line 19a from line 18.  | \$2,364.55   |
| 20.            | Calculate your current monthly income for the year. Follow these steps:   |  |
|                | 20a. Copy line 19b.   | \$2,364.55   |
|                | Multiply by 12 (the number of months in a year).  | x 12   |
|                | 20b. The result is your current monthly income for the year for this part of the form.  | \$28,374.60  |
|                | 20c. Copy the median family income for your state and size of household from line 16c.  | \$75,454.00  |
| 21.            | How do the lines compare?   |  |
|                | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  | LO Y CO O VERSION IN   |
|                | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  | V Manus V  |
| larit          | Sign Below  |  |
|                | By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  | 3000 to 1000 to  |
|                | Signature of Debtor 1 Signature of Debtor 2   | The state of the s |
|                | Date 3/2/2017 Date MM/DD/YYYY   |  |
|                | If you checked 17a, do NOT fill out or file Form 122C-2.  If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line above.   | 4  |